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A SYSTEMATIC TRAINING PROGRAM IN HELPING
AND HUMAN RELATIONS SKILLS

by



MARY LYNNE (WATSON) GOKIERT

A THESIS

SUBMITTED TO THE FACULTY OF GRADUATE STUDIES AND RESEARCH
IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE DEGREE
OF DOCTOR OF PHILOSOPHY
IN
COUNSELING PSYCHOLOGY

DEPARTMENT OF EDUCATIONAL PSYCHOLOGY

EDMONTON, ALBERTA

SPRING, 1974

THE UNIVERSITY OF ALBERTA
FACULTY OF GRADUATE STUDIES AND RESEARCH

The undersigned certify that they have read, and recommend to the Faculty of Graduate Studies and Research, for acceptance, a thesis entitled A SYSTEMATIC TRAINING PROGRAM IN HELPING AND HUMAN RELATIONS SKILLS submitted by Mary Lynne (Watson) Gokiart in partial fulfilment of the requirements for the degree of Doctor of Philosophy in Counseling Psychology.

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The undersigned certify that they have read, and
recommend to the Faculty of Graduate Studies and Research,
for acceptance, a thesis entitled A SYSTEMATIC TRAINING
PROGRAM IN HELPING AND HUMAN RELATIONS SKILLS submitted by
Mary Lynn Watson (Watson) Bachelor in partial fulfillment of the

ABSTRACT

The major purpose of the present investigation was two-fold: (1) the development of a manual outlining a Systematic Program to be followed in training individuals to communicate empathy and to discriminate facilitative levels of interpersonal functioning; (2) the experimental evaluation of the STP through an investigation of the effects on communication, discrimination, and self-disclosure associated with participation in a systematic training group as contrasted with participation in a human relations training group.

Subjects were 77 individuals employed in social service occupations who attended 2 separate three-day communication workshops sponsored by the Division of Community Psychiatry of the Edmonton Board of Health. The subjects who attended each workshop were randomly assigned to 6 groups of 6 to 8 members. For each workshop, the 6 groups were randomly assigned to one of two treatments: three groups received the experimental treatment and three groups received the placebo treatment. The twelve group trainers were randomly assigned to experimental and placebo treatment groups.

The post-treatment data collected on communication of empathy, discrimination of facilitative functioning, and rate of self-disclosure were used to test four major hypotheses and three secondary questions.

Two of the major hypotheses were supported by the data. Those subjects who participated in a systematic training group scored significantly higher on a posttreatment test

of communicated empathy than participants in a human relations training group. Participants in the systematic training group also scored significantly better on a post-treatment test of discrimination of facilitative responses than participants in the placebo group.

The remaining two hypotheses dealing with rate of self-disclosure were not confirmed by the data. There was no difference between the experimental and placebo groups on reported disclosures to target persons. Similarly, the hypothesis that a positive relationship would be found between rate of self-disclosure and level of communicated empathy was not supported by the data.

The results of the secondary questions, dealing with the relationship between the level of communication and discrimination of the treatment groups and the assessed level of communication and discrimination of the individual group trainers, showed that no difference existed between groups with trainers with low scores and groups with trainers with high scores. These findings tend to indicate that the Systematic Training Program can effect significant changes in communicated empathy and discrimination of facilitative responses, regardless of the level of communicated empathy and discrimination of the trainer using it.

The results of the final question dealing with the relationship between the level of communicated empathy and level of discrimination showed a significant correlation between the level of communicated empathy and the level of discrimination of participants.

of communicated empathy than participants in the control group. Participants in the treatment group also scored significantly higher on the treatment test of discrimination than participants in the control group. The remaining two hypotheses were not confirmed. A significant difference between the two groups was reported for the treatment test of discrimination. The results of the secondary questionnaires showed that the level of communication and discrimination of the treatment group was higher than that of the control group. These findings tend to indicate that the systematic training program can affect nonverbal changes in communicated empathy and discrimination of facilitative responses, regardless of the level of communication. The results of the final question dealing with the correlation between the level of

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The writer wishes to express her deep appreciation to those people who contributed generously of themselves to help make possible the completion of this dissertation.

Special thanks are due to Dr. H.W. Zingle and Dr. T. Maguire for their encouragement, competence, and understanding throughout the project. Recognition is also due to Dr. D. Phillips whose cooperation and helpful comments made the study possible; to Dr. J.G. Paterson for his helpful suggestions, and to the external examiner, Dr. R.C. Harris, for his participation and interest in the results of the study.

Sincere thanks are extended to those colleagues and fellow-graduate students who gave generously of their time to act as group trainers - Ed Branch, Dr. Joe Couture, Eugene Dubord, Ruth Eyeford, Gary Ford, Rich Glade, Dr. Sally Goforth, Hazel Ann Isgar, Paul Peel, Ken Rowell, Dr. Lana Lee Schmidt, and Dr. Helen Simmons.

The writer is also indebted to those individuals who participated in the study.

To Steve, for his endless patience and encouragement and willingness to take on more than his share of parenting, I give my greatest appreciation. Finally, my appreciation to our boys, Jeffrey and Simon, who continue to inspire their mother.

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The writer wishes to express his appreciation to those people who contributed generously of their time and effort to help make possible the completion of this study. Special thanks are due to the following: Madame for their excellent standing throughout the study to Dr. P. Phillips whose cooperation and assistance made the study possible. Finally, my appreciation to Dr. Lane, Dr. and Dr. for their participation in the study. To Steve, for his endless patience and encouragement and willingness to take on more than his share of parenting, I give my greatest appreciation. Finally, my appreciation to Simon, who continues to inspire.

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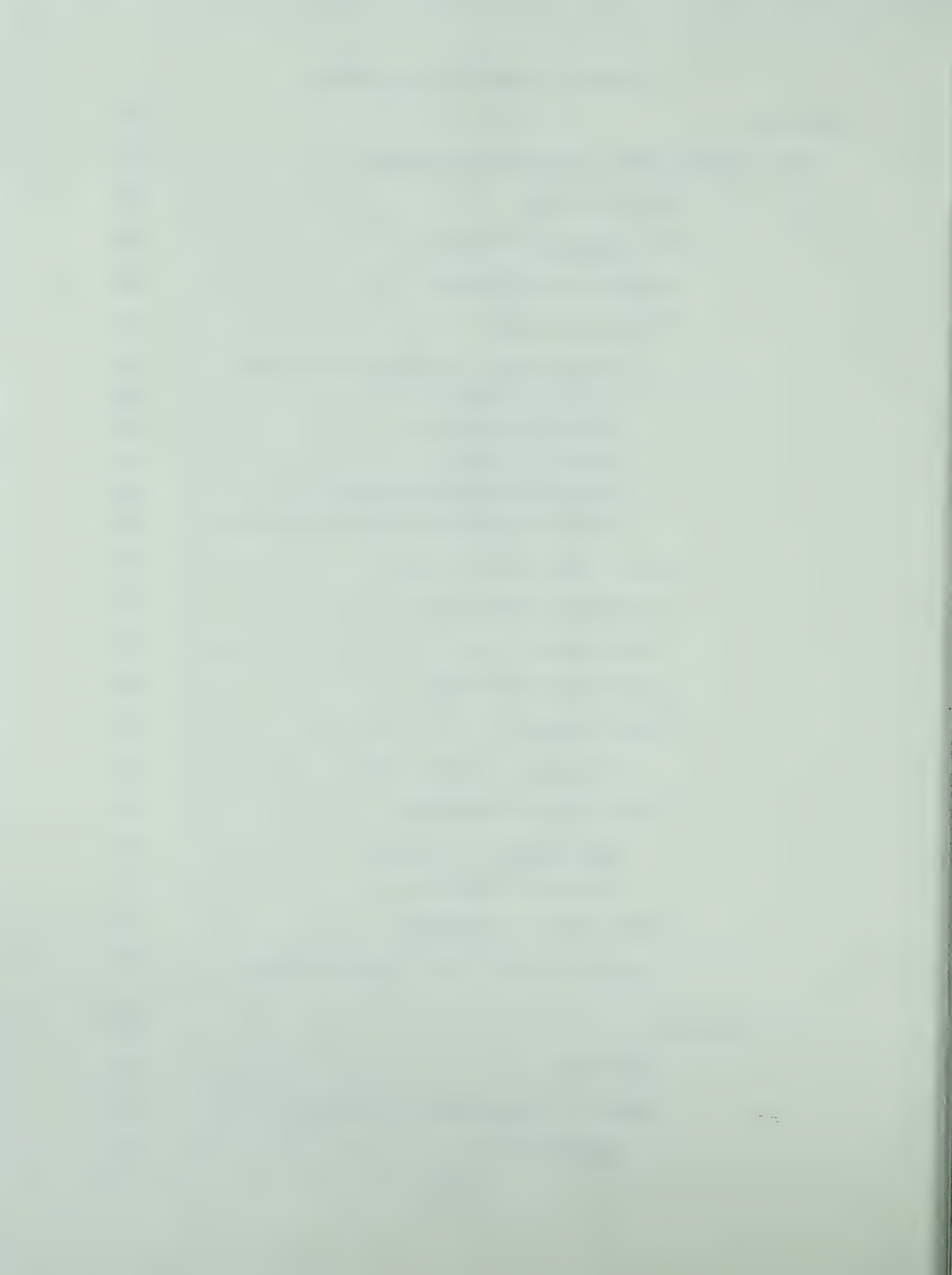


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1892	Mar 15 Cash	25.00
1893	Apr 20 Cash	15.00
1894	May 25 Cash	10.00
1895	Jun 30 Cash	5.00
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Description

1. General Methods of Facility as
Individual Functioning

CHAPTER I

Introduction

Recent research into therapist variables discusses the importance of developing an integrated didactic and experiential approach to train individuals in the discrimination and communication of the interpersonal dimensions of empathy (E), positive regard (PR), genuineness (G), and concreteness (C) (Carkhuff, 1969a; Carkhuff & Berenson, 1967; Truax & Carkhuff, 1967).

Carkhuff (1969a), Smith (1965), and Truax and Carkhuff (1967) have suggested that group leaders should systematically use didactic and experiential techniques to teach human relations skills. Smith views interpersonal sensitivity as a complex variable which consists of six parts; level accuracy, spread accuracy, empathic accuracy, observation accuracy, stereotype accuracy, and individual accuracy. According to Smith, if we want to increase overall sensitivity to others then we must offer training which focuses systematically on developing skills in each of the five areas. For example, to develop observation accuracy trainees might be taught to pay close attention to expressed attitudes, tone of voice, fidgeting, and so on.

Truax and Carkhuff have been concerned with identifying what qualities differentiate "effective therapists from ineffective therapists". In a number of studies they have

concluded that counseling "may be for better or for worse" (Truax & Carkhuff, 1963). Effective or "high functioning" helpers have been identified as being high on the dimensions of communication of empathy, warmth, regard, genuineness, and to a lesser extent concreteness, self-disclosure, and openness (Carkhuff, 1969a; Truax & Carkhuff, 1967; Truax & Mitchell, 1971). Carkhuff has concluded that to varying degrees, trainees can be taught to develop their interpersonal skills on each of those communication dimensions.

In particular Carkhuff has forwarded two propositions which summarize his stance well. They are:

1. The most effective programs appear to be those that (a) focus upon primary facilitative and action-oriented dimensions complemented by secondary dimensions involving potential preferred modes of treatment and (b) integrate the didactic, experiential, and modelling aspects of learning (Carkhuff, 1969, p. 151).
2. The level of the counselor-trainer's functioning appears to be the single most critical aspect of effective training (Carkhuff, 1969, p. 157).

While many of the research studies in this area have grown out of interest in individual and group counseling and psychotherapy, theoretical speculation and research studies have also shed light on the relevance of facilitative conditions for other kinds of interpersonal relationships. Carl Rogers expressed this point of view in the following statement:

If our views of therapy have any validity they have application in all those fields of human experience and endeavor which involve (a)

The first part of the paper discusses the importance of the research and the objectives of the study.

The second part of the paper describes the methodology used in the study and the data collection process.

The third part of the paper presents the results of the study and discusses the findings.

The fourth part of the paper discusses the implications of the findings and provides conclusions.

The fifth part of the paper discusses the limitations of the study and suggests areas for future research.

The sixth part of the paper discusses the contributions of the study to the field of research.

The seventh part of the paper discusses the practical applications of the findings.

The eighth part of the paper discusses the policy implications of the findings.

The ninth part of the paper discusses the ethical considerations of the study.

The tenth part of the paper discusses the acknowledgments and the references.

The eleventh part of the paper discusses the appendices and the endnotes.

The twelfth part of the paper discusses the index and the glossary.

interpersonal relationships and (b) the aim or potentiality of development or change in personality and behavior (Koch, 1959, p. 193).

Truax and Carkhuff (1963) view the therapeutic relationship simply as one special case. In their discussion of the broader application of facilitative conditions to other interpersonal relationships, the authors have referred to teacher-pupil, parent-child, nurse-patient and caseworker-delinquent dyads.

Hence, there is a growing body of evidence that points to the relevance and importance of taking into account these interpersonal dimensions, not only in the training of professional counselors and therapists, but in the training of teachers, social workers, and nurses as well. Both, carefully screened college graduates interested in school guidance activities and unselected volunteers from the school, hospital and community at large, demonstrate change in the direction of more facilitative functioning as a result of training periods ranging from 15 hours to 1 year (Berenson, Carkhuff & Myrus, 1966; Carkhuff & Truax, 1965b; Demos, 1964; Demos & Zuwaylif, 1963; Gunning, Holmes, Johnson & Rife, 1965; Hansen & Barker, 1964; Jones, 1963; Kratochvil, 1969; Martin & Carkhuff, 1968; Munger & Johnson, 1969; Pierce, Carkhuff & Berenson, 1967; Webb & Harris, 1963; Wrightsman, Richard & Nobles, 1966).

In summary, several therapist variables which differentiate effective therapists from ineffective therapists have been identified. The importance of taking these

dimensions into account, when training professional counselors and therapists as well as other professionals engaged in interpersonal relationships, has been stressed. Research evidence also suggests a preferred mode for such training, through the use of an integrated didactic and experiential approach.

Hence, it would seem that a worthwhile goal for applied research would be the development and evaluation of a systematic program designed to increase levels of facilitative functioning on these dimensions.

Purpose of the Study

A comprehensive manual outlining the program to be followed in training individuals to function at facilitative levels has not been developed. The purpose of the investigator in the present study was to develop, implement, and evaluate a training program designed to train individuals to function at a facilitative level on the specific dimension of empathy. The training program developed was carefully outlined in a manual (Appendix E) and includes the specific step-by-step procedures to be followed by the group trainer.

In order to evaluate the effectiveness of the training program, an experimental study was carried out. A sample of persons engaged in helping professions was trained, using the Manual. The effect of the training program on the level of communicated empathy, level of discrimination of

dimensions also account, when training professional
counselors and therapists as well as their
engaged in interpersonal relationships, has been
Research evidence also suggests a specific
training, through the use of an integrative
experiential approach

Hence, it would seem that a
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Figure 2.0

A sample of the manual
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specific dimension of emotion
was carefully outlined in a manual (Appendix A)
the specific step-by-step procedures to be followed by the
group trainer.

In order to evaluate the effectiveness of the training
program, an experimental study was carried out. A sample
of 30 was engaged in helping professions was trained.

A training program on

Identification of

facilitative responses, and rate of self-disclosure was assessed.

General Statement of the Problem

The present study was concerned with two major problems:

- 1) The development of a systematic program to train individuals to function at a facilitative level of empathy.
- 2) The experimental investigation of the effectiveness of the training program on the level of empathy.

Overview

Chapter I is an introductory chapter designed to acquaint the reader with the purpose of the present investigation. Chapter II contains a review of the related literature including a historical perspective of research in psychotherapy and counseling. Studies supporting the theoretical base of a didactic-experiential approach to training human relations skills are presented along with research evaluations on the effectiveness of such training. Chapter III discusses the rationale for a Systematic Training Program in Helping and Human Relations Skills as well as the procedure for development of the program. Chapter IV outlines the research methodology employed in the present investigation. The results of the investigation are presented in Chapter V and are discussed in Chapter VI. Selected references and various appendices follow Chapter VI.

CHAPTER II

A Review of Related Literature

Historical Perspective

After a careful review of the relevant research literature dealing with the effects of counseling and psychotherapy, Truax and Carkhuff (1967) concluded that Eysenck (1960) was essentially correct in saying that on the *average* the therapeutic enterprise was ineffective. Eysenck (1952) combined the reports on 19 studies covering more than 7,000 cases treated by eclectic or psychoanalytic approaches to psychotherapy. His tables indicate that 64% of the 7,293 patients seen in treatment showed improvement. This 64% improvement rate tends to be somewhat poorer than the estimates of spontaneous recovery rates in non-treated neurotics - an average improvement of 66 to 72%. In spite of the inclusion of questionable data in his early review and his indiscriminate pooling of data from reports with divergent criteria, Eysenck's general conclusions seem to have been confirmed by more recent and more adequately controlled research investigations. As Frank (1961) and others have noted, statistical studies report that about 2/3 of neurotic patients are improved immediately after treatment regardless of the type of psychotherapy but that the same improvement rate has been found for persons not receiving therapy.

Levitt (1957, 1963) in assessing the effectiveness of

A Review of Related Literature

Historical Perspective

After a careful review of the relevant literature dealing with the effects of counseling and therapy, Truax and Carkhuff (1967) concluded that (1960) was essentially correct in saying that the therapeutic enterprise was ineffective. Eysenck (1962) combined the reports on 19 studies and cases treated by a eclectic or psychoanalytic approaches. His tables indicate that 64% of the patients seen in treatment showed improvement rate tends to be somewhat lower than estimates of spontaneous recovery rates in neurotics. An average improvement of 36 to 52% the inclusion of questionable data in his indiscriminate pooling of data from reports with diverse criteria. Eysenck's general conclusion seem to have been confirmed by more recent and more adequately controlled research investigations. As Frank (1961) and others have noted, statistical studies report that about 2/3 of neurotic patients are improved immediately after treatment regardless of the type of treatment but that the same improvement

counseling and psychotherapy with children indicated that psychotherapy resulted in 67% improvement rate at termination of treatment in 3,399 reported cases and in 78% improvement rate at a 5-year follow-up on 4,219 cases. Since the 5-year follow-up for spontaneous recovery rates suggests that at least 80% show remissions of symptoms, these data also suggest an average ineffectiveness of counseling and psychotherapy.

However, there also exist some relatively well controlled studies which show that certain counselors or therapists produce beneficial effects beyond those observed in equivalent control groups. In fact a re-examination of the evidence reported by Eysenck (1952) and Levitt (1957) showed the same pattern. Their overall improvement rates, which were identical for treatment or no treatment were obtained by pooling studies reporting markedly different improvement rates for different therapists.

In the reported research comparing psychotherapy to no psychotherapy, differences in variability of outcome have usually not been investigated. However, Bergin (1963), in a careful evaluation of the effects of psychotherapy, noted that in the results of the Barron and Leary (1955), the Cartwright and Vogel (1960), and the Truax (1963) reports which showed no overall mean differences between therapy and control groups, the expected critical finding does emerge: the patients receiving psychotherapy show significantly greater variability in personality change indices at the

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conclusion of psychotherapy than do the controls. Eysenck (1960) had also noted that several people had reported greater variability in the treated groups than in the untreated, and that this seemed to suggest a two-way effect of psychotherapy.

Two important questions arise from the research evidence demonstrating greater variability in outcome in the treated groups than in the untreated groups. Firstly, what accounts for this large variability in outcome and secondly, how do the helpful counselors differ from the harmful or ineffective ones? After a review of virtually all published material dealing with the effectiveness of counseling and psychotherapy, Truax and Carkhuff (1967), Truax and Mitchell (1968), and Truax and Wargo (1966) concluded the following:

1. the therapeutic endeavor is, on the average, quite ineffective;
2. counseling or therapy itself is a nonunitary phenomenon;
3. some counselors and therapists are significantly helpful, while others are significantly harmful, with a resulting average helpfulness not demonstrably better than the average of no professional help;
4. through close examination of existing theories and clinical writings, it is possible to identify therapeutic ingredients likely to lead to helpful and to harmful client outcomes, and, through research, to identify some ingredients;
5. it is possible to translate the research findings into training and practice; and
6. it is therefore possible to markedly enhance the average effectiveness of counseling and psychotherapy by increasing the number of helpful counselors or therapists and decreasing the number of psychonoxious or harmful practitioners (Bergin & Garfield, 1971, p. 301).

Studies Supporting the Theoretical Base of the Systematic Training Program

Truax and his co-workers from 1962 to the present report considerable research evidence supporting the significant and positive relationship between positive client change and certain therapeutic ingredients. These therapist conditions have been defined and their relationships to outcome delineated in a large number of studies (Truax & Carkhuff, 1967; Truax & Mitchell, 1968). These ingredients of the psychotherapeutic relationship are aspects of human encounters that cut across the parochial theories of psychotherapy and appear to be common elements in a wide variety of psychoanalytic, client-centered, eclectic, or learning-theory approaches to psychotherapy.

Three characteristics of an effective therapist emerging from the divergent viewpoints are:

1. an effective therapist is nonphony, non-defensive, and authentic or *genuine* in his therapeutic encounter;
2. an effective therapist is able to provide a nonthreatening, safe, trusting, or secure atmosphere through his own acceptance, positive regard, love, valuing, or *non-possessive warmth*, for the client; and,
3. an effective therapist is able to understand, "be with," "grasp the meaning of," or have a high degree of *accurate empathic understanding* of the client on a moment-by-moment basis (Bergin & Garfield, 1971, p. 302).

Research into the effective role of therapist's accurate empathy, nonpossessive warmth, and genuineness in

the helping relationship grew out of the pioneering research of Whitehorn and Betz at Johns Hopkins Hospital (Betz, 1963; Whitehorn, 1964; Whitehorn & Betz, 1954) and the theoretical work of Carl Rogers (1951, 1957, 1959). Whitehorn and Betz's now classic contribution was a retrospective study of 7 psychiatrists who had an improvement rate of 75% in their schizophrenic patients, as contrasted to 7 other psychiatrists of similar training who had an improvement rate of only 27%. The research evidence indicated that the successful therapists were warm and attempted to understand the patient in a personal, immediate and idiosyncratic way; whereas the less successful therapists tended to relate to the patient in a more impersonal manner, focussing upon psychopathology and a more external kind of understanding.

In Betz's (1963) further delineation of successful and unsuccessful therapists, the descriptions were consistent, although not identical, with the three characteristics of empathic understanding, nonpossessive warmth, and therapist genuineness or authenticity.

One of the first studies attempting to relate the therapist's level of the therapeutic triad to patient outcome was by Halkides (1958), who selected brief samples from early and late therapy interviews from the most successful and the least successful therapy cases. Ratings were made on the therapist levels of empathic understanding, positive regard, and self-congruence using a very brief scale based upon Rogers' writings (1957). Her report

indicated that the therapists of the most successful cases showed significantly higher levels of these three conditions than did the therapists of the least successful cases.

In a study of group psychotherapy with hospitalized patients, Truax (1961a) found that accurate empathy, warmth and genuineness were significantly associated with the patient's engagement in the process of therapy, self-revelation and self-exploration. The findings suggested that of the three, the therapist's accurate empathy and genuineness were by far the most important for patient behavior.

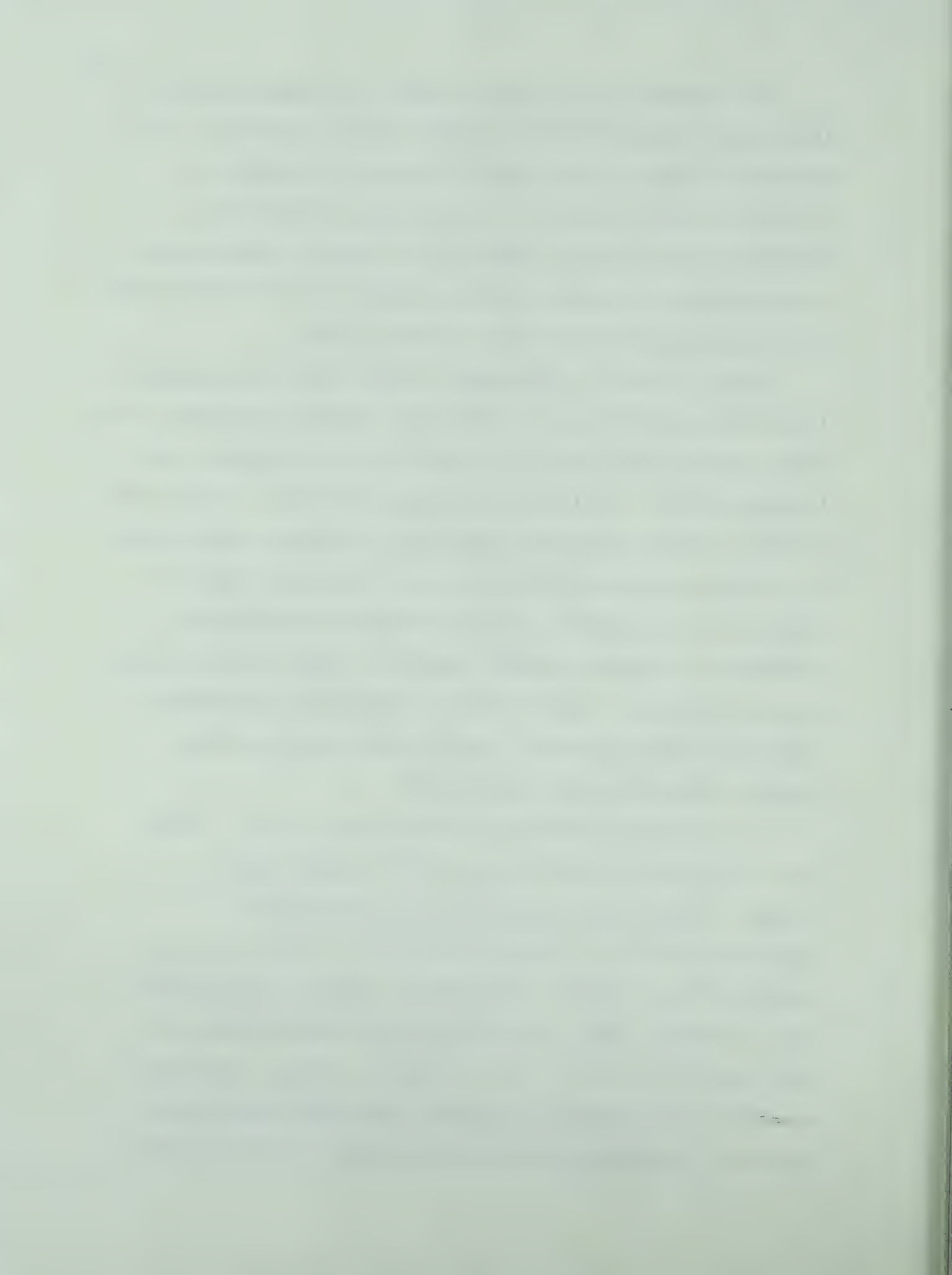
A four-year study of psychotherapy with 16 hospitalized schizophrenics, conducted at the University of Wisconsin under the leadership of Rogers, Truax, Gendlin, and Kiesler, has yielded a number of studies (Rogers, 1962; Rogers, Gendlin, Kiesler, & Truax, 1967; Truax, 1963; Truax & Carkhuff, 1963; Truax & Carkhuff, 1967). Findings from these reports indicated that:

1. patients receiving psychotherapy and those receiving control conditions showed little difference in average constructive personality change and, particularly, no difference in subsequent hospitalization, but that
2. patients whose therapists offered high levels of nonpossessive warmth, genuineness, and accurate empathic understanding showed significant positive personality and behavior change on a wide variety of indices, and
3. patients whose therapists offered relatively low levels of these interpersonal skills during therapy exhibited deterioration in personality and behavioral functioning (Bergin & Garfield, 1971, p. 302).

The evidence thus indicated that the three central therapeutic ingredients were predictive of outcome. In addition, since in the samples studied the number of therapists offering high levels of these conditions, approximated the number offering low levels, the average therapy patient outcome was not markedly different from that of the average patient in the control group.

Truax, Carkhuff and Kodman (1965) studied 40 hospitalized mental patients, all relatively chronic, who were given group therapy sessions twice weekly over a 3 month, time-limited period. Patients receiving high levels of accurate empathy showed improvement equal to, or greater than, that of patients receiving relatively low levels of accurate empathy on all subscales of the Minnesota Multiphasic Personality Inventory (MMPI), which was administered pre- and post-therapy. Statistically significant differences occurred on the Pt scale, the Sc scale, and the Welsh Anxiety Index obtained from the MMPI.

In the study previously cited (Truax *et al.*, 1965) and in the Johns Hopkins study of 40 outpatients treated in individual psychotherapy by resident psychiatrists at the Phipps Psychiatric Clinic at Johns Hopkins (Truax, Wargo, Frank, Imber, Battle, Hohn-Saric, Nash, & Stone, 1966), the three conditions were not all positively correlated. In the Hopkins study, warmth was negatively correlated with empathy and genuineness and, therefore, negatively related to outcome. In the present



study (Truax *et al.*, 1965) genuineness was negatively correlated with warmth and empathy and therefore, negatively related to outcome. Truax and Mitchell (1971) in interpreting the data suggest that when two conditions of the therapeutic triad are highly related but the third is negatively related, then the prediction of outcome should be based on the two that are most highly related.

Truax and Wargo (1967a) studied 160 hospitalized patients who met for only 24 sessions over a 3-month period. Significant differences in improvement favoring patients receiving relatively high levels of empathy, warmth, and genuineness combined, were obtained on a Q-sort measure of self-concept, the Welsh Anxiety Index, the MMPI subscales of Mf and Sc, and particularly on time spent out of hospital during a one-year follow-up. In a study of 80 institutionalized juvenile delinquents receiving 3 months of group counseling, Truax and Wargo (1967b) reported similar but stronger findings again indicating a significant association between the level of empathy, warmth, and genuineness offered by the group counselor, and the degree and direction of behavioral and personality change occurring in the juvenile delinquents.

Truax and Wargo (1969) replicated the same basic design and study on a population of 80 outpatients, receiving group psychotherapy, and obtained similar significant findings for all conditions combined. When accurate empathy, nonpossessive warmth, and genuineness were analyzed

separately, the data suggested that nonpossessive warmth, in particular, and genuineness, to a lesser extent, were more critical than accurate empathy for outpatients in group therapy.

The above studies, taken together, support the theoretical view that the level of therapist accurate empathy, nonpossessive warmth, and genuineness are related to constructive change in patients. However, the research reported above deals with relatively successful and relatively unsuccessful cases, rather than comparisons with control groups receiving no psychotherapy. Eysenck (1952) has stressed the value of comparisons with control groups by suggesting that even under the best conditions, psychotherapy might not be significantly superior to no treatment. A number of studies have now been completed utilizing control groups.

Studies Employing Control Groups

A study from the Wisconsin project, involving 14 schizophrenic patients receiving individual psychotherapy and 14 carefully matched control patients (Truax, 1963; Truax & Carkhuff, 1963), found an overall significant difference in psychological functioning among patients receiving high conditions, patients receiving low conditions, and control patients. In terms of the number of patients at or above the median change in psychological functioning; all patients in the group receiving low levels of conditions

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were below the median; and six of the eight patients receiving high conditions showed positive change. Looking more closely at individual psychological test measures, the following findings emerged. On measures of anxiety level, patients receiving low conditions showed a significant increase in anxiety, the controls showed no change, and patients receiving high conditions showed a significant drop in anxiety level. On Q-sort measures of change in self-concept, both the control group and the patients receiving high conditions in therapy showed a slight positive gain, while the patients receiving low conditions showed a significant change toward poorer adjustment and self-concept. On the MMPI, significant differences between the three groups occurred in the predicted direction on the D scale, the Pd scale, the Sc scale, the Si scale, and the sum of clinical scales. No differences, however, were observed on any of the subscales of the Wittenborn Psychiatric Rating Scale as filled out by ward attendants. Finally, the findings indicated that patients receiving high conditions in psychotherapy spent significantly more time out of hospital than either the control group or patients receiving low conditions in psychotherapy. Patients who received low conditions in psychotherapy did not differ from the control population.

Dickenson and Truax (1965), working with a group of college underachievers, found that those students receiving group counseling showed significant improvement in

grade point average over those students who did not receive counseling. A striking finding was that after therapy the total group of students receiving counseling functioned at the level predicted by their college entrance exam scores, and were thus no longer underachievers, while the control population continued to achieve college grades at a level significantly below their predicted level. When those receiving counseling were divided according to the levels of therapeutic conditions they were offered during therapy, the findings indicated that only those receiving relatively high levels of empathy, warmth, and genuineness showed improvement over the controls. Those receiving only moderate levels showed grade point averages and changes approximating those in the control group.

Another study (Truax, Wargo, & Silber, 1966) involved female juvenile delinquents in group counseling. The results demonstrated that the delinquents receiving high conditions in group psychotherapy showed improvement significantly beyond that seen in the control group, on all 12 measures obtained pre- and posttherapy. In particular, they showed significant gains over the control group toward more adequate self-concepts and toward perceiving parents and other authority figures as more reasonable and less threatening. The therapy group showed significant superiority over the control group on a psychological test which differentiates delinquents and non-delinquents. Of particular importance is the fact that not only did the

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overall differences in the amount of time spent out of the institution significantly favor the delinquents who had received high conditions in group therapy, but the superiority over the controls extended throughout a follow-up of one year.

A fourth series of studies (Carkhuff & Truax, 1965a, 1965b) utilized a control group to evaluate the effects of high conditions therapy with hospitalized patients. Since the study also deals with training, a discussion of the findings will be presented in a later section of this chapter.

These studies taken together suggest that therapists or counselors who are accurately empathic, nonpossessively warm in attitude, and genuine, are indeed effective. Also, these findings seem to hold with a variety of therapists and counselors, regardless of their training or theoretic orientation, and with a wide variety of clients or patients, including college underachievers, juvenile delinquents, hospitalized schizophrenics, college counselees, mild to severe outpatient neurotics, and the mixed variety of hospitalized patients. Further, the evidence suggests that these findings hold in a variety of therapeutic contexts and in both individual and group psychotherapy or counseling.

The Core Dimensions

As a result of the research previously mentioned, scales were designed to assess the process and outcome of

therapy. Thus, attempts have been made to operationalize these scales to assess accurate empathy, nonpossessive warmth, and genuineness (Rogers *et al.*, 1967; Truax & Carkhuff, 1967). In addition, the dimensions of concreteness, self disclosure, immediacy, and confrontation have been added (Carkhuff, 1969a). The original scales of empathy, nonpossessive warmth, and genuineness have been described as measuring the "core dimensions" of counseling and psychotherapy (Truax & Carkhuff, 1967). In general, these three therapeutic conditions have been found to be positively intercorrelated (Shapiro, 1968).

Several studies have reported the results of a factor analysis of the intercorrelations among the core dimensions. Carkhuff (1969c) acknowledges a principal factor, which accounts for approximately 67% of the variability of the scales. However, he contends that persons functioning at high levels on these scales are successful in differentiating between the dimensions, whereas low functioning persons are not. Further evidence, based on responses of both high and low functioning therapists, disputes this claim (Muehlberg, Pierce & Drasgo, 1969); a single factor was found to account for practically all of the variation. This factor was described as being "friendly, likeable and helpful" (Collingwood, Hefele, Muehlberg, & Drasgow, 1970). Thus, although present evidence is equivocal more support is presented which suggests that the core conditions are not functionally independent.

After an extensive review of research on the effects of the counselor-offered conditions, this writer suggests that empathy might easily represent the single factor identified in the previously mentioned studies. In most cases empathy correlates highly with the other core dimensions as well as with outcome. Hundleby (1972) in accordance with a review of the historical aspects of empathy suggested that empathy is comprised of a number of facets and cannot be represented as a unitary trait. He goes on to suggest that perhaps a multidimensional concept of empathy could be justified rather than viewing empathy as an independent trait among a number of core conditions. In any case, empathy could be said to represent most of the variance among the core conditions with the remaining dimensions contributing little further information.

The Measurement of Empathy

Critical Analysis in Rating Empathy

The Accurate Empathy Scale developed by Truax (1967) and a more compact form adapted by Carkhuff (1969a), have commonly been used to rate tape-recorded segments of actual interviews. The accurate empathy scale differed from prior attempts to measure the level of therapist empathy by focusing not only on understanding of the client, but upon the communication of that understanding to the client. The scale also focused on the therapist's responses rather than upon his attitude or intention.

Trained raters or judges have applied the empathy scale to brief samples which are excerpted from audio-tape recordings of psychotherapy. While the scale is usually applied to audio-tape recordings, it has also been applied to video tape recordings, and could readily be applied to live observations.

Caracena and Vicory (1969) have argued that something other than empathy is being rated and further that

judges ... may depend on superficial, objective counselor behaviors that are more readily available to them than is information about an abstract variable such as empathy (Caracena & Vicory, 1969, p. 514).

This appeared particularly true when judges used audio-visual data, since counselors visual cues were found to account for one-third of the variance in the empathy judgements. Caracena and Vicory (1969) also criticized the tape recorded segments on the basis of client's perceived empathy, which was found to be unrelated to judgements of raters. They suggested that the "sounding and looking empathic" as rated by the judges, may be unimportant to client perceptions of empathy.

Criticism by Chinsky and Rappaport (1970) relates to the methodology employed in reporting the reliability of raters. For example, five counselors may be rated on ten tape-recorded segments. Normally, this could be taken to represent a sample size of 50, yet if independence of judgements is to be taken into account, actual sample size

would be 5. Rappaport and Chinsky (1972) emphasized the point again and stressed their earlier suggestion that researchers use either a larger number of therapists, each rated once, or a larger number of raters, none of whom rate a given therapist more than once, in order to provide a more realistic estimate of reliability. Their point is that after trained raters rate the same therapists several times they can recognize the voice and remember how they had rated each therapist previously.

The use of small segments of each interview could also be criticized as a source of error. The question may be raised as to the validity of assessing the level of empathy during an interview, which may extend for an hour or more, by rating only a few minutes of interaction. However, at least two studies (Melloh, 1964; Truax & Carkhuff, 1963) have indicated that a counselor's level of empathy when rated on short, tape-recorded segments, does not tend to vary across time. The factor analytic study of Muehlberg, Pierce, & Drasgow (1969) also points to a consistency in ratings of therapist functioning, since inconsistency would tend to produce heterogeneous matrices yielding many factors instead of a single factor. Thus, short segments taken randomly over the course of an interview could be considered a valid sampling of the entire interview since the level of empathy does not appear to fluctuate appreciably throughout an interview.

Standard Communication Index

Many of the criticisms leveled at the rating of tape-recorded segments can be avoided by employing the Standard Communication Index (see Appendix A) developed by Carkhuff (1969a). This index consists of 16 client statements taken from actual counseling interviews which represent a wide range of problem areas. Subjects complete the Standard Communication Index (SCI) by writing their responses to each statement. The responses are then scored by trained raters using the Scale for the Measurement of Empathy in Interpersonal Processes (see Appendix B). Independence of judgements is assured by randomizing responses before rating. In addition, judgements are free of rater bias based on "sounding or looking empathic".

Carkhuff (1969b) reports a high correlation (.89) between ratings obtained on the SCI and those from actual interviews with standard clients. Greenberg (1968) established a close relation among responding to the SCI in either a verbal or written mode and responding in an actual interview situation. Antonuzzo and Kratochvil (1968) also found little difference in whether the SCI was presented verbally (recorded) or in written form.

Communicated Empathy and Self-Disclosure

In his expansion of the core conditions first identified by Carl Rogers (1957), Carkhuff (1969a) includes self-disclosure as a necessary therapist-offered condition.

Carkhuff (1969a) goes on to postulate a positive relationship between the disclosing of significant information about himself by the helper and the degree to which the helper is able to be self-disclosing in appropriate relationships. Given the postulated relationship between self-disclosure and helper effectiveness, a positive relationship between self-disclosure as measured by Jourard's Self-Disclosure Questionnaire and level of communication as measured by the Standard Communication Index would be expected.

Jourard (1959) defines self-disclosure as the act of letting another person know what you think, feel, or want, and as such is the most direct means by which an individual can make himself known to another person. Jourard (1959) has suggested that accurate portrayal of the self to others is an identifying criterion of healthy personality, while neurosis is related to inability to know one's "real self" and to make it known to others. Scott (1969) studied the effect of sensitivity training upon self-disclosure in a sample of undergraduate university students. He found that sensitivity training produced a significant increase in self-disclosure rate to male and female friend targets as measured by Jourard's Self-Disclosure Questionnaire.

Whalen (1969) suggests that in a group setting, neither models nor instructions alone are sufficient to increase meaningful self-disclosure. Male college student volunteers were constituted into groups of four and asked to participate in a group dynamics experiment. In a factorial

design, subjects were exposed to one of four conditions: a film model of a similar group talking about themselves with openness and candor, plus detailed descriptions designed to elicit interpersonal openness; a film model plus minimal instructions; detailed instructions with no film; and minimal instructions only. It was found that only subjects in the film model plus detailed instructions group talked about themselves openly. Subjects in the other three conditions devoted most of their time to impersonal discussion.

Scott (1969) reports an increase in rate of self-disclosure to selected targets as a function of sensitivity training. In view of Whalen's (1969) findings, however, it was expected that participants in a systematic training group which integrated the three central elements of modelling, didactic teaching, and experiential learning would admit to more self-disclosure than participants in a human relations training group.

Efficacy of Didactic-Experiential Programs

The finding from research on counseling and psychotherapy, which indicates that helping may be for better or worse, suggests to the present investigator that an important area for consideration is that of training. The research suggests a relationship between the level of functioning of counselors and therapists on the specific dimension of empathy. Hence, it is important to look at the training programs available for aspiring counselors and

therapists and note the emphasis or lack of emphasis on empathy training.

Although Dymond (1948) pointed to the question of whether or not empathy could be developed, Luchins (1950, 1951) was the first to report evidence that "so-called empathic ability" is amenable to training. His early procedures aimed at eliminating certain factors which tended to interfere with a person's understanding of another individual. In the past ten years, considerable evidence has been amassed, primarily based on the research of Truax and Carkhuff, which indicates that training can improve the communication of empathy. However, there is limited evidence showing that the increased empathic skills ensuing from this training relate to actual behavioral changes in clients. The evidence that does exist is primarily the result of studies in which lay personnel have received training.

Carkhuff and Truax (1965a) evaluated two separate but similar and concurrent training programs. One program involved 12 advanced graduate students and the other involved 5 volunteer lay hospital personnel. The classes met twice weekly for 2 hour sessions over a 16 week semester. In addition, students spent 2 hours a week listening to tape-recordings of therapy interviews. At the end of the semester ratings on accurate empathy, positive regard, therapist self-congruence, and client depth of self-exploration were compared with ratings of taped excerpts from experienced therapists and from the publicly dispersed

tapes of 4 prominent therapists. Scores on the 4 dimensions ranked the group in the following order: experienced therapists, graduate students, and lay personnel. None of the differences were significant except in regard to the therapist self-congruence dimension. Hence, during 100 hours of training specifically directed toward variables empirically demonstrated to be necessary for therapist effectiveness, the performance of students and lay personnel can be brought to a level similar to that of experienced therapists. The ratings of both the lay personnel and psychology graduate students were found to be superior to those reported by Bergin and Solomon (1970), of postinternship fourth-year graduate students from a more didactically and psychoanalytically oriented clinical training program.

Carkhuff and Truax (1965b), in an additional study of the effectiveness of the above-mentioned lay personnel, found that inpatients seen in 24 group-counseling sessions by the lay personnel made significantly greater constructive behavior change than did a control group of inpatients. It is important to note that the counselors were given instruction only in providing therapeutic conditions and had no theoretical background.

Berenson, Carkhuff and Myrus (1966), in a much shorter 20-hour program, attempted to measure the effect of different aspects of the integrated, didactic-experiential training program. Eighteen male and 18 female volunteer students were randomly assigned to three groups: the training group

(T) which involved the total training, including 4 hours of quasi-group therapy; the training control group (TC) which received the same program minus the use of the research scales and the quasi-group therapy but included 4 hours of discussion on typical college problems; and the control group (C) which received no training. Both T and TC groups received 16 hours of training over 8 weeks. Students were assessed pre- and posttraining, on level of empathy, positive regard, genuineness, concreteness, and the degree of self-exploration elicited. Behaviors were assessed by means of tape-ratings, inventory reports of standard interviewees and significant others, and inventory self-reports. The results demonstrated that the greatest gain was made by the T group, the least gain by the C group, and the TC group was intermediate. The results supported the authors' contention that the total program would have the most effect.

Truax and Silber (1966), in a cross validation of a previous demonstration of graduate student change as a function of didactic-experiential training, compared the "therapeutic conditions" of students early in training (after 14 class hours and 11 hours of listening to tape recordings) with the conditions provided by them after an additional 34 hours of training. From early to late training there were significant increases in the level of accurate empathy ($p < .05$) and in the level of genuineness ($p < .01$) but the improvement in nonpossessive warmth was not significant. The results of this study would indicate that

longer training increases the level of empathy. On the other hand a shorter training program of up to 20 hours has produced posttraining levels of empathy similar to the levels achieved in an identical program extended over 100 hours (Jordan, 1968). Ivey, Normington, Miller, Morrill, and Haase (1968) have experimented with an ingenious brief variant of the didactic-experiential type of program. The "microcounseling" technique developed focuses on teaching specific counseling skills in prepracticum training. Ivey *et al.* (1968) reported three studies in which an attempt was made to teach:

- (a) attentiveness (1 hour)
- (b) accurate reflection (2 hours)
- (c) summarization of feelings (2 hours).

In the study of attentiveness, 38 dormitory counselors were divided into experimental and control \underline{S}_s , with 38 paid volunteers as clients. As rated by 2 judges, the experimental \underline{S}_s were significantly higher, postinstruction, in eye contact and in "verbal following" than the control group whose members merely conducted 2 interviews with no intervening training. For the experimental group there was also a significantly greater increase in client ratings on the Semantic Differential Form and the Counselor Effectiveness Scale.

In both the latter studies, accurate reflection and summarization of feelings, there were significant increases in the appropriate skills, in client ratings, and in the

students' self-confidence.

In a more recent study Parks (1971) compared two forms of human relations training, an unstructured self-analytic treatment and a structured direct communications treatment. Both treatments consisted of 15 hours of training. The direct communications treatment employed didactic, modeling, and experiential activities to encourage the development of the skill of empathy and the ability to recognize various levels of facilitative responses. At the end of treatment the self-analytic groups showed no improvement in rating facilitative responses, while the direct communication groups showed strong evidence of learning to rate facilitative responses. With regard to the development of the ability to communicate empathy, the direct communications groups scored significantly higher than the subjects of the self-analytic groups on the Park-Matheson Human Relations Videotape Test of Empathic Understanding.

Didactic Versus Experiential Methods

For the lack of better terminologies the terms "didactic" and "experiential" methods of developing empathy may be misnomers. These terms have been used in the literature to describe contrasting treatments. However, a review of the treatment programs indicated that often a didactic method included experiential elements or an experiential treatment included didactic elements. A study by Jordan (1968) demonstrates the inappropriateness of the terms. An attempt was made to compare the effects of didactic training

and experiential training on empathy, warmth, and genuineness. The didactic training included such activities as role-playing, shaping, and teaching by precept as part of the treatment. The experiential group of subjects were in a group therapy experience. It would seem that a training experience that involves role-playing and hence the trying out of new behaviors would be more appropriately defined as an integrated didactic-experiential training program.

In contrast to Jordan's definition of didactic, Carkhuff, Collingwood, and Renz (1969) referred to a training experience focusing exclusively upon discrimination training, with no opportunity to practice formulating responses, as an exclusively didactic program. It is also interesting to note that without the experiential element of practising new behavior, subjects did not increase in the ability to communicate at a higher level of empathy. However, there was a significant improvement in the ability to discriminate between different levels of facilitative functioning. On the other hand, Jordan (1968) found no significant differences between the "didactic" and "experiential" treatments but found that the didactic training, when considered separately, produced significantly greater change than the control treatment on the three criteria of empathy, warmth, and genuineness. Hence, it seems to the present writer that the terms didactic and experiential are misnomers and more adequate terminology would be structured and unstructured with more adequate

descriptions of the treatments. As it is employed here the term "structured" refers to teaching situations wherein the teacher (or trainer) refers to some "a priori" plan to encourage learner activities. A structured method for developing interpersonal skills might involve systematically attempting to teach various communication skills through practice in role-playing, paraphrasing, discussion and so on. On the other hand, an unstructured method refers to situations where there is no "a priori" plan, the trainer does not act as discussion leader, and the individuals participate as learners with the data being the transactions between members. The traditional T-group as described by Benne, Bradford, and Lippitt (1964) represents an unstructured method.

Carkhuff (1969a) and Truax and Carkhuff (1967) have advocated a structured approach to training individuals in interpersonal skills which integrates three critical sources of learning: modelling, didactic teaching, and experiential learning. This approach and the theoretical rationale will be discussed in detail in Chapter III.

A recent unpublished study (Hundleby, 1973) investigated whether individuals who are taught to communicate empathy are more successful in specific interview situations than individuals who do not receive such training. Subjects were 55 grade twelve students enrolled in two separate classes. Students in one class constituted the treatment group and took part in fourteen, 80 minute lessons which

were based on the skills of listening, observing and communicating. The lessons included extensive role-playing activities which emphasized learning through self-experience. Students in the other class constituted the control group and took part in regular classroom instruction. Treatment effects were assessed through a series of posttreatment interviews. A student from the treatment group was randomly paired with a student from the control group and a common interviewer then interviewed each student independently for a period of 20 minutes. Outcome evaluation was based on the choices made by two different types of interviewers: (a) trained interviewers who chose the "better communicator" in each pair, and (b) student peer interviewers who chose "someone I could go and talk to" from each pair. The results of the study supported the main hypothesis: both the trained interviewers and the student peer interviewers chose treatment students significantly more often than control students. Other findings showed that: treatment students scored higher on communicated empathy than control students; students chosen by trained interviews, and by student peer interviewers, scored higher on communicated empathy than students not chosen; and a significant positive relationship existed between being chosen by a trained interviewer and being chosen by a student peer interviewer. This study provides evidence that the increased empathic skills ensuing from training lead to actual behavioral changes beneficial to the individual.

Summary

As a result of the pioneering research of Whitehorn and Betz at Johns Hopkins Hospital (Betz, 1963; Whitehorn, 1964; Whitehorn & Betz, 1954) and the theoretical work of Carl Rogers (1951, 1957, 1959) research into the effective role of therapist's accurate empathy, nonpossessive warmth, and genuineness began. Since that time numerous studies have been conducted which suggest that therapists or counselors who are empathic, warm in attitude, and genuine, are indeed effective. These findings seem to hold with a wide variety of therapists and counselors, regardless of their training or theoretical orientation, and with a wide variety of clients or patients. Further, the evidence suggests that these findings hold in a variety of therapeutic contexts and in both individual and group psychotherapy or counseling.

Research primarily initiated by Carkhuff (1969a) and Truax and Carkhuff (1967) has led to a means of assessing empathy, warmth, and genuineness. Most important is the research and evidence indicating that skills of communicating empathy may be learned in a relatively short time through structured training experiences emphasizing an integrated didactic-experiential model for training.

CHAPTER III

Development of a Systematic Training Program

Rationale for a Systematic Training Program

The majority of studies reviewed by the present investigator did not have systematic procedures for the trainers to follow or failed to report them in sufficient detail to permit replication. At the time this study was generated, a detailed description of step-by-step procedures to be followed in training individuals to function at higher levels of empathy was lacking. Carkhuff (1969a) and Truax and Carkhuff (1967), however, have laid the groundwork and discussed the central ingredients of such a training program. What appeared to be lacking in their work was a training manual which systematically outlined the procedures to be followed by a trainer in conducting training experiences.

In developing a Systematic Training Program (STP), the investigator had specific objectives which the program was to achieve. The STP was intended to:

1. be goal-directed and action-oriented,
2. leave the trainee with tangible and usable skills,
3. promote longer retention of learned skills, and
4. offer a built-in means of assessing the effectiveness of the program.

The STP intended to provide the trainer with:

1. a system of well-defined procedures,
2. a well-defined role,
3. a high and useful level of confidence in what he is doing,
4. the opportunity to attend fully to nonverbal cues, and
5. a specific behavioral base for understanding trainee behavior.

Finally, the STP intended to provide the trainee with:

1. an understanding of the helping program and his role in it,
2. a concrete awareness of his level of progress in the helping program,
3. the knowledge that the trainer is guided by trainee feedback in so far as it fits the trainer's system,
4. the opportunity to actively accelerate the helping program, and
5. the assurance that the helping program is resolving difficulties that it set out to resolve.

Other Systematic Training Programs

As previously mentioned, a manual outlining specific procedures to be followed by a group leader in training individuals to function at higher levels of empathy was lacking. However, this is not to say that such systematic training programs do not exist for other purposes. An example of such a systematic program is provided by the Northwest Regional Educational Laboratory program of *Interpersonal Communications* (1969), a multi-media package

of training materials for use in a workshop setting. The design consists of 20-90 minute training exercises which are sequential and cumulative. The exercises may be conducted continuously in a four-day workshop or spread over a period of several weeks. In addition to knowledge about communication and practice in specific skills, the trainee learns to identify behaviors of his own individual style of communicating. Butmar, a National Training Laboratory associate, states that the Interpersonal Communications Program provides trainees' competencies in:

- paraphrasing to assure understanding of what others are saying.
- behavior description as a skill to enable others to identify and recognize a specific behavior to which an individual is responding.
- describing, as distinguished from expressing, feelings.
- checking one's perception of others' feelings or intent.
- identifying non-verbal communication cues.
- applying guidelines to giving and receiving feedback.
- identifying the effects of expectations on communications.
- identifying the effects of feelings on communications.
- applying the concept of matching of behavior with intentions in communicating.
- identifying freeing and binding behaviors which affect openness of communication.
- applying the circular process model of interpersonal relations to identifying behaviors of one's own style of communicating.

- identifying the effects of directionality on communications.
- identifying patterns of communication.
- identifying the influence on one's personal style of communicating under pressure.
- applying techniques of assessing one's knowledge and skills in interpersonal communication.
- developing interpersonal support for improving communication skills (Paley, 1972, p. 37-38).

It becomes obvious from the previous list of competencies, provided by the program, that such a program is not adequate for the specific purpose of training individuals to function at higher levels of empathy, since the program does not deal specifically with the helping relationship but with communication in general. The program could be useful as an initial training experience, prior to specific training in empathic communication. The Interpersonal Communications program was useful to the present investigator as a model and the sections on paraphrase, behavior description, description of feelings, and perception check were adapted for the first section of the STP, to provide 4 hours of training in basic interpersonal skills.

The Minnesota Couples Communication Program, a systematic training program developed by Miller, Nunnally, and Wackman (1972) deals specifically with the coupling relationship and is designed to be conducted with groups of couples. Hence most of the exercises are not appropriate to a group of single persons.

Thus, it was obvious that the systematic programs

available did not achieve the kind of objectives outlined earlier in this chapter, due to the weaknesses mentioned. Hence, a need existed for the development of a Systematic Training Program which would achieve the objectives outlined.

Procedure for Developing the STP

Carkhuff (1969a) and Truax and Carkhuff (1967) have discussed essential aspects of a training program geared to produce helpers who can effectively relate to persons in need of help and facilitate their positive movement. Although they have outlined essential aspects of such a program, Truax and Carkhuff have not provided a systematic training manual. The present program however represented an attempt to develop a manual incorporating many of the elements discussed by Truax and Carkhuff. Training programs used by Truax (Truax & Lister, 1971) and Carkhuff (Carkhuff & Banks, 1970) have been described as including "role-playing involving successive reinforcement experiences in communication, developed in such a manner as to shape the most effective level of empathy (Carkhuff & Banks, 1970, p. 413)." Such training appears to follow the social learning model proposed by Bandura and Walters (1963) who reported that acquisition of new behavior is often facilitated by imitation.

Social learning theory has led to demonstrations (Bandura, 1962; Bandura, Ross, & Ross, 1961, 1963) which show that when a model is provided, patterns of behavior are typically acquired in large segments or in their

entirety rather than through a slow, gradual process based on differential reinforcement. The assumption, then, is that a good deal of a person's behavior repertoire may be learned through imitation of what he observes in others (Bandura, 1967).

Role-playing has been found to be a particularly effective means of producing behavior change, since the role-player at first dependently accepts the assigned role and then is usually independently reinforced for reproducing the behavior. Indeed, during the role-playing process, when the role-player's previous activities become a model for his own, or another's further behavior, the person may receive reinforcement both in his capacity as a model and in his capacity as an observer and imitator (Bandura & Walters, 1963).

Consequently, the STP was developed around three central elements which have been discussed by Carkhuff (1969a) and Truax and Carkhuff (1967) and which attempt to integrate the critical sources of learning (Bandura & Walters, 1963):

1. Modelling - a group context in which the trainer communicates minimally facilitative levels of empathy, respect, genuineness and concreteness to the trainees. This means that the trainer offers facilitative levels of empathy as well as establishing himself as a model who can sensitively share experiences with another and act upon these experiences. This modelling or imitative process

should serve to increase the trainee's own behavioral response repertoire.

2. Didactic - a highly specific didactic teaching and "shaping" process in which the trainer focuses upon the facilitative dimensions which he is employing in interaction with the trainee. He uses the Carkhuff (1969a) scales for "shaping" the trainees' responses toward high levels of empathy.

3. Experiential - through experiential learning by the actual practice of new behavior the trainee's experiential base of both understanding and action frees him to further experience and experiment with himself. In order for trainees to function effectively in the helping role they must be given practice in the helping role. Hence, in order for the trainees to learn to communicate effectively they must be given practice in communication.

Hence, in developing the STP an attempt was made to integrate the three critical sources of learning in a manual outlining the step-by-step procedures to be followed by the trainer. The modelling aspect of learning is provided for by using trainers with background training and experience in human relations and group leadership. Two audio-tapes are also included in the training program to provide models of therapeutic interaction. One tape is a half hour session of a well-known client-centered therapist and the other tape is comprised of brief excerpts from counseling interviews and demonstrates various levels of therapist

functioning.

The didactic aspect of learning is provided for by including various hand-outs and theory sessions on the facilitative dimensions appropriate to the helping relationship. The trainer focuses on the facilitative dimensions specifically by using the Carkhuff (1969a) scales for "shaping" the trainees' responses toward higher levels of empathy. The experiential element of the program is provided for through exercises and specific practice in communicating empathy in role-playing situations.

The STP Manual may be found in Appendix E. The training program as defined in the manual is divided into two sections. The first section consists of four units concentrating on the basic communication skills of paraphrase, perception check, behavior description, and description of feelings. The first section comprises four hours of training time. The rationale for including this introductory section was based on the knowledge that individuals are functioning at different skill levels when they begin training. Hence, during the initial training period, the trainer can begin assessing the level of functioning of the trainees. In addition, the section on basic communication skills gives trainees an opportunity to sharpen their skills or learn new skills so that they can start from the same skill base. This section, since it involves dyad and triad activities, allows trainees to get to know other group participants quickly with a minimum

of threat.

The second section of the training program consists of three units concentrating on instruction and practice in the communication of empathy and positive regard, genuineness, and concreteness. This section involves approximately 11 hours of training time. Although the major emphasis in training is on acquiring a higher level of empathy, the sections on genuineness and concreteness were included to contribute to the communication of empathy.

The training program can be used in a workshop setting and run continuously over a 3-day period or can be spread over a period of weeks. Fifteen hours is the minimum amount of time required to complete the program while the program can be extended over longer time periods.

Pilot Study

Shortly after the development of the STP a pilot study was carried out. The primary purpose of the pilot study was to use the STP with a sample of individuals and make revisions on the basis of the feedback from trainers and participants. The sample for the pilot study was chosen from student nurses starting their first year of nurses training. The nursing students took part in the training for 3 full days, 1 day a week for 3 weeks. The 50 students in the class were randomly assigned to six groups of ten. Six group trainers were used in the pilot study, four professional counselors with experience in group training and two nursing instructors with a minimum of experience in

group training.

Prior to the pilot study the six group trainers took part in the STP. This training was conducted by the present investigator in 2 all day sessions and one evening session over a 2-week period. During and after the trainer sessions the investigator received useful feedback on the program and as a result made revisions which included:

1. the revision of several hand-outs which were unclear,
2. the inclusion of new hand-outs,
3. the shortening of the first section on basic communication skills from six hours to four hours of training,
4. the modification of exercises,
5. the modification of step-by-step procedures followed by the trainer to increase clarity, and
6. the removal of a unit on positive regard due to its length and difficulties encountered in training persons on this dimension.

The student nurses completed the Standard Communication Index and the Discrimination Index before and after their training. A sample of 25 student nurses from another nursing program with the same entrance requirements served as a control group and completed the measuring instruments only, without the intervening treatment.

In an attempt to evaluate the effectiveness of the STP with a sample of student nurses, the pre- and posttest instruments of 10 experimental subjects, randomly selected from the six groups, were scored by the investigator.

To determine whether there was any change in the

ability to communicate empathy, communicated empathy (CE) scores were calculated for the subjects on the pre- and posttest. The communicated empathy (CE) score was obtained by calculating the mean score for each subject. The average CE score for 10 subjects on the pretest was calculated and compared with the average CE score for subjects on the posttest, using a correlated t test. The results of a correlated t test indicated a significant difference ($p < .01$) between pre- and posttest CE scores, with the average level of empathy of the experimental group increasing from 1.478 to 2.117. The results are found in Table 1.

Table 1

The Effect of Systematic Training on Communicated Empathy

	N	Mean	df	t	p
Pretest	10	1.478	9	7.95	< .01*
Posttest	10	2.117			

* Two tailed test.

To determine whether there was any change in the ability to discriminate "facilitative" responses after the treatment, a mean Deviation Score was obtained for each subject. The total group, mean Deviation Score on the pretest was calculated and compared with the posttest mean Deviation Score. The results of a correlated t test, described in Table 2, indicated a significant difference

between pre- and posttest mean Deviation Scores, with the mean Deviation Score decreasing from 1.371 to 1.063. On the Discrimination Index a lower score is a better score indicating that the subjects increased in their ability to discriminate facilitative responses.

Table 2

The Effect of Systematic Training on Discrimination of
Facilitative Conditions

	N	Mean	df	t	p
Pretest	10	1.371	9	3.33	<.01*
Posttest	10	1.063			

* Two tailed test.

Summary

After a review of the discussion of essential aspects of a training program, presented by Truax and Carkhuff (1967) and Carkhuff (1969), and an inspection of other systematic training programs, the Systematic Training Program was developed. A pilot study was conducted and the STP was revised on the basis of feedback from trainers and participants. The STP in its final form was then used in the present study to train individuals to function at higher levels of empathy and to discriminate facilitative conditions.

CHAPTER IV

Definitions and Research Method

Definitions

Independent Variables

For the present study the following operational definitions were accepted for independent variables.

Systematic Training Group - a structured, face-to-face small group wherein the trainer follows the step-by-step procedure outlined in the Systematic Training Program manual. The trainer employs didactic, modeling, and experiential activities to encourage the development of specific communication skills, and particularly the skill of empathy.

Human Relations Training Group - a relatively unstructured face-to-face small group wherein individuals participate as learners and the data are the transactions among members. The trainer role is best described as "non-directive" but he may at times introduce specific communication skills didactically and suggest group exercises.

Participants - are subjects who either took part in a Systematic Training Group or a Human Relations Training Group.

Trainers - are those persons who were either leading a Systematic Training Group or a Human Relations Training Group.

Dependent Variables

For the present study the following operational definitions were accepted for dependent variables.

Accurate Empathy - as used in this study, involves both an awareness or understanding of the thoughts and feelings of another person and the verbal facility to communicate this understanding. For the purpose of this investigation, consideration is given only to the verbal mode of communicating empathy. The ability to communicate empathy is operationally defined by a score obtained on the Standard Communication Index (SCI). Responses to the sixteen stimulus expressions which comprise this index are rated using the Scale for the Measurement of Empathy in Interpersonal Processes (Carkhuff, 1969a). The actual communicated empathy score (CE) is the average rating obtained from the sixteen written responses.

Discrimination - is defined as the ability to rate, on a five-point scale developed by Carkhuff (1969a), the degree to which a response to a client shows empathy, respect, genuineness, concreteness and various other qualities. Ability to discriminate the level of "helping" responses is operationally defined by a score on the Discrimination

Index (DI).

Self-Disclosure - is defined as the act of letting another person know what you think, feel, or want, and as such is the most direct means by which an individual can make himself known to another person. Self-disclosure refers to the process of making the self known to other persons while target-persons are persons to whom information about the self is communicated. The level of self-disclosure is operationally defined by scores on The Self-Disclosure Questionnaire (SDQ). The SDQ developed by Jourard and Lasakow (1958) consists of six general categories of information about the self, with ten items in each category. Subjects indicate on a 4-point scale the extent to which they have talked to each specified target person about the sixty listed items. In addition to yielding a total self-disclosure score across all aspects of self-disclosure, raw data from the SDQ questionnaire can be transferred into selected target scores across all aspects of self-disclosure.

The Research Problem

The present study was concerned with two major problems:

- (1) The development of a systematic program to train individuals to function at a facilitative level of empathy.
- (2) The experimental investigation of the effectiveness of a systematic training program on the level of facilitative functioning.

Design of the Study

The Posttest-Only Placebo Group Model was chosen as the research design. Subjects were randomly assigned to two treatment conditions by using proportional stratified sampling procedures (Ferguson, 1959, p. 134). Campbell and Stanley (1963) have referred to this as a true experimental design. Assurance of lack of initial biases between groups is provided for by randomization. This design controls for internal validity and is preferable to the Pretest-Posttest Control Group Design because it controls for the interaction of testing and treatment which the latter does not. The possibility of a pretest having a sensitizing effect on subjects was particularly relevant in the present investigation since the instruments of evaluation were very closely related to the experimental treatment.

An Experimental-Placebo Group design was preferable to an Experimental-Control Group design because equal attention is provided to the control group, thus controlling for the probability of a Hawthorne Effect. In this way, any difference for the experimental group on the posttest can be attributed to the training program.

Instrumentation

All subjects were required to complete the following questionnaires in the stated order immediately

following the experimental and placebo treatments.

1. The Standard Communication Index (Carkhuff, 1969a)
(Appendix A).
2. The Discrimination Index (Carkhuff, 1969a)
(Appendix C).
3. The Self-Disclosure Questionnaire (Jourard, 1964)
(Appendix D).

The Standard Communication Index

The Standard Communication Index (SCI) was included in the test battery to provide a measure of the level of communication of empathy of participants. Level of communication of empathy is determined by presenting the subject with a series of written helpee stimulus expressions with instructions for the subject to formulate in a written form meaningful responses to these expressions. In formulating responses subjects are instructed to respond as they would if someone came to them seeking assistance in a time of distress. Complete instructions are presented with the SCI (see Appendix A).

The 16 client stimulus expressions are standardized and represent helpee expressions which have been developed to sample responses that cover a wide range of problem areas. That is, the helpee expressions represent client statements from actual counselling situations which cross three dominant affect areas with five dominant content areas. They are:

A. Dominant Affect

1. depression - distress
2. anger - hostility
3. elation - excitement

B. Dominant Content

1. social - interpersonal
2. educational - vocational
3. child-rearing
4. sexual - marital
5. confrontation of the counselor

The excerpts are arranged so that each affect area is matched with each content area. In addition a silence excerpt is included as a stimulus for eliciting the subject's response.

The SCI was designed by Carkhuff (1969a) to assess the level of communication in prospective helpers; since he maintains that the best device for selecting individuals who will function effectively in the helping role is an index of the level of communication of these individuals. In addition, the SCI was proposed as a screening device for counselor education programs. The main rationale for the index is based on the assumption that the best index of a future criterion is a previous index of that criterion.

Treatment studies employing the SCI (Carkhuff, 1969d; Carkhuff & Bierman, 1970; Carkhuff, Collingwood, & Renz, 1970; Carkhuff, Friel, & Kratochvil, 1970) found that the initial level of communication obtained by the SCI was

predictive of both degree of change as well as final level of functioning.

Evidence of empirical validity has been reported by Greenberg (1968) and Antonuzzo and Kratochvil (1968). Devoid of either training or treatment orientation, Greenberg (1968) in a counterbalanced design established a close relation ($r=.85$) among the following three conditions:

- (a) responding in a written form to the SCI
- (b) responding verbally to the SCI
- (c) responding in an actual helping role.

This research established that both written and verbal responses to helpee stimulus expressions are valid indices of assessment of the counselor in the actual helping role. Antonuzzo and Kratochvil (1968), in turn, established a close relation between (a) the verbal or recorded presentation of the SCI and the written responses of the subjects and (b) the written presentation of the SCI and the written responses of subjects.

Scoring the SCI

Responses to the SCI are scored by trained raters using the Scale for the Measurement of Empathy in Interpersonal Processes (see Appendix B). This scale ranges from level 1, in which the expressions of the helper either do not attend to or detract significantly from the expressions of the other person, to level 5, in which the helper's responses add significantly to the feeling and meaning of the other person.

Acceptable indices of test reliability and interrater reliability have been reported for the scale in the following studies: Cannon and Carkhuff (1969); Carkhuff, Kratochvil and Friel (1968); Carkhuff (1969b); and Kratochvil (1969).

Cannon and Carkhuff (1969) found Pearson Product-Moment correlations for two trained raters. Individual rate-rater reliabilities employing gross ratings form were .95 and .93 and interrater reliability was .89. Carkhuff, Kratochvil, and Friel (1968) determined intrarater or internal consistency reliabilities on the empathy dimension of .90, .99, and .94.

While the validity of the SCI has been demonstrated, the degree of validity of the rating scale is largely a function of the particular rater who employs it (Carkhuff, 1968; Lehman, Ban, & Donald, 1965; Marsden, 1965). However, evidence of concurrent validity may be obtained by comparing ratings made by independent raters with ratings supplied by Carkhuff (1969a) for the SCI.

Training of Raters

The three raters used in the present study were all graduate students in Counselling Psychology at the University of Alberta. Training included 10 hours of intensive instruction and practice in rating empathy. The training program was conducted by the present writer, along with two other Doctoral Candidates. The trainers, who were all experienced in empathy training, did not take part in rating the actual data. Table 3 shows the rater intercorrelations

of the three raters with Carkhuff's keyed ratings for the DI at the end of the training period. Internal consistency of these ratings (KR-20 reliability) was .99. These results establish the validity of the present raters according to the criterion set by Carkhuff (1969a).

TABLE 3
Pearson Product-Moment Correlations with Criterion
Ratings Presented by Carkhuff (N=32)

	Rater 1	Rater 2	Rater 3	Carkhuff
Rater 1		.94	.93	.93
Rater 2			.94	.93
Rater 3				.92
Carkhuff				

Scoring of Data

Following training, the raters proceeded to score the data using the Scale for the Measurement of Empathy in Interpersonal Processes (Carkhuff, 1969a). The actual written response expressions of the subjects were number coded, randomized, and typed so as to ensure elimination of rater bias arising from form, style or writing ability. The typed responses to each item were then presented to the rater in such a way that the responses to item one on the SCI were scored, then the responses to item two on the SCI, and so on. In other words, the total 16 responses to the SCI for

one subject were not scored at one time. This method was adopted to prevent the rater being influenced by a rating he had assigned on a previous item. Each item was assigned a value from 1.0 (low) to 5.0 (high). Due to the reported reliability of the SCI, half units (1.5, 2.5, etc.) were employed to increase the measuring precision of the scale. Sixteen individual scores were obtained for each subject on the SCI. The communicated empathy (CE) score was obtained by calculating the mean score for each subject.

An overlap-alternating procedure (Westwood, 1972) was employed in rating responses. Using this method, each of the 1,424 response expressions was independently rated by two of the three raters. In order to determine interrater reliability, three sets of anonymous samples were included with the actual data for all three raters (near the beginning, middle, and end). Estimates of interrater reliability obtained from this procedure may be found in Table 4. Internal consistency of these ratings (KR-20 reliability) was .95.

To arrive at the average \bar{r} value across total pair ratings, the coefficient for each rater pair was converted to $\underline{Z_r}$ scores. Then the mean of the like pairs was determined in terms of the $\underline{Z_r}$ mean. This mean value was then converted from an $\underline{X_{Z_r}}$ to arrive at the average \bar{r} shown in Table 4 (Ferguson, 1959, p. 412).

TABLE 4
Pearson Product-Moment Correlations Between Raters
on Anonymous Samples (N=66)

	Rater 1	Rater 2	Rater 3
Rater 1		0.86	0.85
Rater 2			0.81
Rater 3			

Average $r = 0.84$

The Discrimination Index

Carkhuff (1969a) reported a series of studies wherein a Discrimination Index (DI) had been employed as a predictive index of the effectiveness of the communication training programs. The main rationale of such a scale was based on the assumption that the best index of a future criterion is a previous index of that criterion. Carkhuff maintains that a certain amount of ability to discriminate between responses is essential if a counselor is to accurately communicate empathy, positive regard, and so on. The development of an index which would serve as a predictive index of training effectiveness was undertaken by Carkhuff with the intention that it would serve as a screening device for counselor training programs. The DI as developed by Carkhuff (1969a) was used in this investigation to measure the ability of subjects to discriminate "facilitative" responses following

participation in the training programs.

The DI consists of 16 written client stimulus expressions which represent statements from live counselling sessions. The client stimulus expressions are the same as those for the SCI and hence cross three dominant affect areas with five dominant content areas.

Subjects taking this test are presented with four alternative counselor statements which could be made to each client stimulus expression. The two variables that were manipulated in formulating helping responses were:

- (a) the level of facilitative conditions offered by the helper, and
- (b) the helper's action orientation.

Thus, in response to each helper stimulus expression, four possible combinations of helper responses occur in random order: high facilitative (HF) - high active (HA); high facilitative (HF) - low active (LA); low facilitative (LF) - high active (HA); low facilitative (LF) - low active (LA). The subject's task is to rate each response on a five-point scale with regards to whether a high or low facilitative level of facilitative functioning is shown. A brief description of facilitative functioning and the rating scale are presented in Figure 1 along with a sample question.

The index of reliability reported for the DI on a population of graduate counselor trainees was .79 and .83 (Carkhuff, Kratochvil, & Friel, 1968).

The test is scored by subtracting the subject's rating

FIGURE 1

Gross Ratings of Facilitative Interpersonal
Functioning

The facilitator is a person who is living effectively himself and who discloses himself in a genuine and constructive fashion in response to others. He communicates an accurate empathic understanding and a respect for all of the feelings of other persons and guides discussions with those persons into specific feelings and experiences. He communicates confidence in what he is doing and is spontaneous and intense. In addition, while he is open and flexible in his relationships with others, in his commitment to the welfare of the other person he is quite capable of active, assertive and even confronting behavior when it is appropriate.

You will read a number of excerpts taken from therapy sessions. Rate each excerpt 1.0, 1.5, 2.0, 3.0, 3.5, 4.0, 4.5 or 5.0 using the continuum below.

1.0 /	1.5 /	2.0 /	2.5 /	3.0 /	3.5 /
None of these conditions are communicated to any noticeable degree in the person.		Some of the conditions are communicated and some are not.		All conditions are communicated at a minimally facilitative level.	
4.0 /		4.5 /		5.0 /	
All of the conditions are communicated, and some are communicated fully.				All are communicated fully, simultaneously, and continually.	

Sample Question:

EXCERPT 4

HELPEE: Gee, I'm so disappointed. I thought we could get along together and you could help me. We don't seem to be getting

Figure 1 continued.

anywhere. You don't understand me. You don't know I'm here. I don't even think you care for me. You don't hear me when I talk. You seem to be somewhere else. Your responses are independent of anything I have to say. I don't know where to turn. I'm just so--doggone it--I don't know what I'm going to do, but I know you can't help me. There is just no hope.

HELPER RESPONSES:

- ____(1) I have no reason to try and not to help you. I have every reason to want to help you.
- ____(2) Only when we establish mutual understanding and trust and only then can we proceed to work on your problem effectively.
- ____(3) It's disappointing and disillusioning to think you have made so little progress.
- ____(4) I feel badly that you feel that way. I do want to help. I'm wondering, "Is it me? Is it you, both of us?" Can we work something out?

on each item from the keyed ratings provided by two experienced and expert raters who, in previous outcome studies, had demonstrated a high degree of predictive validity in their use of the rating scales (Carkhuff, 1968, 1969a; Carkhuff & Berenson, 1967). A mean Deviation Score for the 64 responses (16 expressions x 4 responses) is then calculated. Carkhuff (1969a) reports that the mean Deviation Score for various groups ranges from 1.4 to .4. For example, parents ($\underline{N}=20$) $X=1.4$; college freshman ($\underline{N}=330$) $X=1.1$; teachers ($\underline{N}=10$) $X=1.0$; experienced counselors, not systematically trained ($\underline{N}=20$) $X=.6$; experienced counselors, systematically trained ($\underline{N}=10$) $X=.4$.

While the DI is successfully able to differentiate between trained and untrained groups, its use as a predictive index for individual performance has not been successful. Carkhuff (1969a) found virtually no correlation between pretraining discrimination ability and posttraining communication ability on several criteria. Carkhuff has reported that high "communicators" are high discriminators, but the reverse is not necessarily true. Thus, he suggested that discrimination and communication abilities are independent for low functioning communicators.

Other than the results cited previously for differences between groups and the index of reliability reported on a population of graduate counselor trainees, no further evidence of reliability or validity is presented.

The Self-Disclosure Questionnaire

A sixty item Self-Disclosure Questionnaire (SDQ) was developed by Jourard and Lasakow (1958) to determine the extent to which research subjects vary in the topics that they disclose to various target people and the extent to which there are cultural and sex differences. For Jourard (1959), self-disclosure is the act of letting another person know what you think, feel, or want, and as such is the most direct means by which an individual can make himself known to another person. Self-disclosure refers to the process of making the self known to other persons while target-persons are persons to whom information about the self is communicated. Jourard (1958) has suggested that accurate portrayal of the self to others is an identifying criterion of healthy personality, while neurosis is related to inability to know one's "real self" and to make it known to others.

In his expansion of the core conditions first identified by Carl Rogers (1957), Carkhuff (1969a) includes self-disclosure as a necessary therapist-offered condition. Carkhuff (1969a) goes on to postulate a positive relationship between the disclosing of significant information about himself by the helper and the degree to which the helpee is able to be self-disclosing in appropriate relationships. Just as helpee self-exploration is an indication of helpee progress, so may increasing levels of helper self-disclosure be an indication of the increasing reciprocal and equalitarian interaction of an effective counselling process. Given the

hypothesized relationship between self-disclosure and helper effectiveness, a positive relationship between self-disclosure as measured by the SDQ and level of communication as measured by the SCI would be expected.

The SDQ consists of six general categories of information about the self, with ten items in each category. Subjects indicate on a 4-point scale the extent to which they have talked to each specified target person about the sixty listed items. A corrected reliability coefficient (odd-even method) of .94 was obtained on a sample of 70 single male and female college students (Jourard, 1964). Of interest is the aspects of self that formed "high disclosure" clusters (tastes and interests, attitudes and opinions, and work) and "low disclosure" clusters (money, body and personality) which were significant at the .01 level. Jourard (1964) questions whether the high and low disclosure clusters reflect a cultural consensus as to what is readily disclosable and what is not. Jourard (1961a) and Plog (1965) report cultural differences between native Germans, Americans, and the British. Reliability correlations across cultures are in excess of .89 with scales of various lengths. Americans were found to be more disclosing than other nationalities.

Although it has been demonstrated that the SDQ has satisfactory reliability, little evidence of the validity of the SDQ has been presented. Since the SDQ is a self-report instrument, it is important to establish the relationship

between scores on the SDQ and the degree of actual self-disclosures. Jourard (1964) cites two studies in which performance on the SDQ was correlated with other measures. Jourard (1962) tested nursing students with a disclosure questionnaire. A year later, at the end of their period of clinical practice, they were rated for ability to establish and maintain a communicative relationship with patients. The students who receive the highest ratings were significantly higher disclosers on the test they had taken the year before than the students receiving the lower ratings.

In a second study with nursing students, substantial correlations were found between scores for disclosure to mother and to girl-friend (obtained while the girls were sophomores) and accumulated grade-point average in nursing courses at time of graduation. The students were graded, in nursing courses, not only for knowing correct answers on objective quizzes, but also for ability to convey to their instructors the meaning of their experiences working with patients, reading assorted books and papers, and so on. The meaning of these experiences was conveyed in reaction papers and on essay examinations. Those students least disclosing with female target-persons were least able to behave in an open way with the nursing faculty. Two years later, the study was repeated with a different self-disclosure questionnaire. The results were comparable, though the correlations were not as high.

The research reported has not clearly established

close relationship between what the SDQ is measuring and actual self-disclosing behavior. The SDQ, however, was the only instrument available to measure self-disclosure and has been used extensively in the past. Hence, the SDQ was used in the present investigation to test the significance of a relationship between self-disclosure and level of communicated empathy. In addition, the SDQ was used to determine whether participants in a Systematic Training Group would admit to more disclosure than participants in a Human Relations Training Group.

For the purposes of the present investigation the target persons were changed. Male friend, female friend, and spouse were retained, mother and father were eliminated, and client and colleague were added. Mother and father were eliminated since it was thought that subjects would not have the opportunity of disclosing more to parents in the three-day workshop time period. In addition, Jourard (1961b) found that as people get older, the amount they disclose to other people in their lives especially parents and same-sex friend gradually diminishes. Disclosure to opposite-sex friend, or spouse, increases from the age of 17 up to about the fifties and then drops off. The sample included no subjects under 17 and very few over 50, and 49 out of 68 subjects completing the SDQ were married. The addition of client and colleague as target persons was intended to provide information on the behavior of the subject in the helping situation and the work situation respectively.

Major Hypotheses Tested

Hypothesis I

Participants in a Systematic Training Group are better discriminators of facilitative levels of functioning, as measured by Carkhuff's Discrimination Index, than participants in a Human Relations Training Group.

Hypothesis II

Participants in a Systematic Training Group, designed to train individuals to communicate empathy, score higher on communicated empathy (CE) as measured by Carkhuff's Standard Communication Index than participants in a Human Relations Training Group.

Hypothesis III

The participants in a Systematic Training Group admit to more disclosure as measured by Jourard's Self Disclosure Questionnaire than participants in a Human Relations Training Group. The posttreatment test of self-disclosure shows a difference in reported disclosures to male friend, female friend, spouse, and colleague targets.¹

¹The other target, client, was disregarded for the purposes of this hypothesis since it was thought that the subjects would not have the opportunity to disclose more to clients due to spending three days at the workshop away from their work environment, followed by the posttest. The client target was included in the questionnaire in order to provide ancillary data concerning total self-disclosure by the sample.

Hypothesis IV

Total self-disclosure, as measured by Jourard's Self-Disclosure Questionnaire, is positively correlated with level of communicated empathy, as measured by Carkhuff's Standard Communication Index.

Secondary Questions

Question I

What is the relationship between the level of communication of the treatment groups on the posttest and the assessed level of communication of the individual group trainer?

Question II

What is the relationship between the level of discrimination of the treatment groups on the posttest and the assessed level of discrimination of the individual group trainer?

Question III

Is there a relationship between the level of discrimination as measured by the Discrimination Index and the communicated empathy score as measured by the Standard Communication Index?

The Sample

Subjects for this investigation were 84 individuals who attended two separate communication workshops sponsored by the Division of Community Psychiatry of the Edmonton Board of Health. Edmonton is a large city with an approximate population of 500,000 people. The Division of Community Psychiatry comes under the auspices of the Edmonton Board of Health and employs psychiatrists and psychologists to act as mental health consultants. In addition to providing consultative services to the social service agencies and educational institutions in Edmonton, the Division sponsors monthly three-day workshops for social service personnel in the City of Edmonton. These workshops have been conducted on a regular basis for the past four years.

The workshops are conducted for three consecutive days in a setting which is isolated from the everyday work situation. Workshop participants return home in the evening. Attendance at workshops is on a voluntary basis with representatives from each local agency attending each time. Typically, the workshop is announced by the Division of Community Psychiatry and invitations and registration forms are sent out to the directors of various agencies, specifying the number of openings that are available for that agency. The director then makes the workshop information available to his personnel and registration forms which include the age, sex, and job description for each applicant

are sent in to the Division.

Hence, the subjects for this investigation were 84 individuals employed by various social agencies and institutions in the City of Edmonton. All subjects held social service positions with an emphasis on relationships with people. The sample included social workers, probation officers, psychologists, school counselors, public health nurses, teachers, and child care workers. It was a heterogeneous sample with respect to specific occupation, age, educational qualifications, and experience; but had the common factor of involvement in relationships with people.

The Procedural Model

The individuals who attended three-day communication workshops in the months of January and February of 1972 provided the sample for the present investigation. The individuals who attended each workshop were randomly assigned to six groups of six to eight members. Since the individuals who attended the workshops varied on the characteristics of sex and occupation, proportional stratified sampling procedures were used in assigning individuals to groups. Thus in constructing the groups, members were drawn at random from the various strata so that all groups would have a proportional number of males and females, social workers, nurses, probation officers, teachers, and so on. This was done by writing the names of all subjects on pieces of paper, then separating them on the

basis of sex. Following this the names were again separated on the basis of occupation and placed in separate bins. The names were thoroughly mixed and drawn at random from the bins and assigned to groups. This procedure resulted in groups with a proportional number of males and females, social workers, probation officers, public health nurses, and so on.

The six groups were randomly assigned to one of two treatments: an experimental treatment or a placebo treatment. Thus, three groups received the experimental treatment and three groups received the placebo treatment in January. The design was replicated in February.

The original sample consisted of 84 individuals and the final sample, i.e. those who completed the posttreatment testing consisted of 77 individuals. The subjects excluded from the final sample were lost for a variety of reasons as described in Table 5.

TABLE 5

Subjects not Included in Final Sample

Reason for Dropping from Sample	Experimental	Placebo
Left workshop after first day due to home problems.....	1	
Left workshop after two days due to new job placements.....	2	
Missed last day of workshop and did not complete posttest..	2	2
Total	5	2

The Trainers

Twelve trainers were needed to conduct the experimental and placebo groups in January and February. The trainers were provided from a pool of individuals who volunteer their time for workshops sponsored by the Division of Community Psychiatry of the Local Board of Health. The trainer pool consisted of individuals with varied training including psychologists at the Masters and Ph.D. level, social workers at the Masters level, community development specialists at the Masters level, psychiatric nurses, and some persons with undergraduate degrees. All of the individuals in the trainer pool had considerable experience in group training and were considered competent trainers by the staff of Community Psychiatry.

To control for varied training and experience, proportional stratified sampling procedures were used in randomly assigning trainers to experimental and placebo treatments. The results of the random assignment of trainers to treatment groups can be found in Table 6.

Procedure for Trainers

All trainers were required to complete the SCI and the DI prior to administering the treatments. The placebo group trainers were asked to complete the questionnaires in the stated order and bring them to a meeting held the day

TABLE 6
Random Assignment of Trainers with Varied Training
and Experience to Groups

Treatment Groups	Placebo Groups
1 Psychologist - Ph.D. level	2 Psychologists - Ph.D. level
2 Psychologists - Masters level with Ph.D. course work completed	1 Psychologist - Masters level with Ph.D. course work completed
1 Psychologist - Masters in Business Administration with Ph.D. course work in Educational Psychology in progress	1 Psychiatric Social Worker - Masters level
1 Community Development Graduate - Masters level	1 Community Development Graduate - Masters level
1 Psychiatric Nurse	1 Undergraduate Degree - B.Ed. with group training and experience

TABLE 7
Summary of Trainer Scores on Communicated Empathy
and Discrimination

Treatment	Trainer	Communicated Empathy	Discrimination
Placebo	1	2.59	.45
	2	2.73	.38
	3	2.13	.58
	4	2.69	.67
	5	2.53	.71
	6	2.03	.91
Experimental	7	2.70	.41
	8	2.63	.41
	9	2.92	.59
	10	2.98	.20
	11	2.31	.31
	12	1.97	.59

before the workshop commenced. Since it was necessary to have the experimental group trainers complete the questionnaires prior to receiving a copy of the training manual, they were asked to complete the questionnaires a week before the workshop commenced and then were given a copy of the Systematic Training Program. The purpose in giving the trainers the STP was to allow them time to become familiar with the procedures and materials. The trainer scores on communicated empathy and discrimination are presented in Table 7.

Prior to the workshop the investigator held a 1½ hour meeting with the experimental group trainers to describe the mechanics of the workshop including the location, group size, the hours, and the use of tape recorders. At the same time Dr. David Phillips, the Director of the Division of Community Psychiatry, met with the placebo group trainers. During the three-day workshop this procedure was continued with Dr. Phillips meeting with the placebo group trainers and the present investigator meeting with the experimental group trainers. This procedure was followed in both the January and February workshops. A major purpose in meeting with the trainers separately was to prevent any discussion between trainers about what was taking place in their groups. The trainers were aware that an experimental study was taking place but were unaware of the research questions.

In an attempt to isolate the effects of the treatments, the research was designed in such a way that there was

little opportunity for discussion between treatment and placebo group members. The schedule of group activities was very tight and the only opportunity for discussion was during the lunch period. However, groups tended to spend this time together and when questioned the trainers reported that group dialogue revealed little evidence that group members were aware that two different treatments were being used. The workshop participants were aware that research was being conducted but were unaware of the research questions or that two different treatments were being used.

Participant Treatments

Experimental Treatment

Of the 42 subjects randomly assigned to the Systematic Training Group treatment, 37 subjects completed the program. Subjects in the six treatment groups received instruction in skills and techniques to improve the communication of empathy. This training took place over a three-day workshop representing a training period of approximately 15 hours. A manual, which outlines the step-by-step procedures followed by the trainer was developed by the present investigator and may be found in Appendix E. A description of the development of the Systematic Training Program may be found in Chapter III. Following the experimental treatment the subjects completed approximately 2 hours of posttesting.

The major purpose of this investigation was the development and evaluation of a systematic program designed to train individuals to function at a facilitative level of empathy. The STP was evaluated using an Experimental-Placebo Group Design: six groups took part in a Systematic Training Group and six groups took part in a Human Relations Training Group. The intent of the investigation was to compare the two treatments, not to compare groups within treatments. Hence, it was necessary to compare the experimental group mean with the placebo group mean. Prior to doing this an analysis of variance of posttreatment communicated empathy scores was performed to determine whether there were significant differences between experimental groups. A summary of the analysis of variance is presented in Table 8. Based on the finding that no significant differences existed between experimental groups, the six groups were lumped together and a mean empathy score was calculated. These results also indicated that differences based on trainer variability were minimal.

TABLE 8

Summary of Analysis of Variance for Differences in
Posttreatment Communicated Empathy Between
Experimental Groups

Source	Mean Square	df	F	Probability
Between (6 groups)	0.22	5	1.31	N.S.
Within	0.17	31		

An analysis of variance of posttreatment discrimination scores was also performed; to determine whether there were significant differences between experimental groups. A summary of the analysis of variance is presented in Table 9.

TABLE 9

Summary of Analysis of Variance for Differences in
Posttreatment Discrimination Scores Between
Experimental Groups

Source	Mean Square	df	F	Probability
Between (6 groups)	0.06	5	1.51	N.S.
Within	0.04	26		

Based on the finding that no significant differences existed between experimental groups, the six groups were lumped together and a mean discrimination score was calculated. These results also indicated that differences based on trainer variability were minimal.

Placebo Treatment

Of the 42 subjects randomly assigned to the placebo treatment, 40 subjects completed the program. Subjects in the six placebo groups took part in a laboratory in human relations training. This training took place over a three-day workshop representing a training period of approximately 15 hours.

The National Training Laboratory System has become known for its use of the training laboratory as an

educational technique. Batchelder and Hardy (1968) currently define this rapidly developing system of human development as follows:

A training laboratory (lab) is an educational strategy which attempts to create a situation in which the participants, through their own initiative and control, but with access to skilled professional leadership and new knowledge, can evaluate their old attitudes and behavior patterns and explore new ones.

The assumption of the laboratory method is that skills in human interactions are best learned through processes of participation in which the learner is involved. The training activities, therefore, are social process events in which the participants are invited to participate, and then to reflect upon their patterns of participation.... A variety of specific activities or components, of which sensitivity training is only one, might comprise a specific training laboratory (Batchelder & Hardy, 1968, pp. 121-122).

The major training activities of the laboratory included:

1. Information or theory sessions during which the trainer lectured and/or gave demonstrations to impart some concepts or ideas about interpersonal communication. Specific communication skills were introduced and practiced in focussed exercises. Participants were encouraged to practice these skills in the group.
2. Participation in unstructured training groups which met throughout the course of the laboratory. The individuals participated as learners and the data were the transactions among members, their own behavior in the group.

The assumption underlying the training group is that each individual may learn from his own motives, feelings and strategies in dealing with other persons. He also learns of the reactions he produces in others as he interacts with them. The training group provides an opportunity to experiment with new behavior, and practice the communication skills taught in the theory sessions.

An analysis of variance of posttreatment communicated empathy scores was performed to determine whether there were significant differences between placebo groups. A summary of the analysis is presented in Table 10. A significant F ratio of 3.45 ($p < .05$) was found indicating that there was a difference between the six placebo groups. A Scheffé multiple comparison of group means revealed that a significant ($p < .05$) difference existed between group two and group five. Group two had a mean communicated empathy score of 1.54 which was close to the other group means while group five had a mean empathy score of 2.34 which seemed to be in the range of the experimental group means.

TABLE 10

Summary of Analysis of Variance for Differences in Post-treatment Empathy Scores Between Placebo Groups

Source	Mean Square	df	F	Probability
Between (6 groups)	0.54	5	3.45	<.05
Within	0.16	34		

An analysis of variance of posttreatment discrimination scores was also performed; to determine whether there were significant differences between placebo groups. A summary of the analysis of variance is presented in Table 11. A significant F ratio of 3.09 ($p < .05$) was found. However, a Scheffé multiple comparison of group means indicated that the difference between individual group means was not statistically significant. These results indicated that differences based on trainer variability were minimal.

TABLE 11

Summary of Analysis of Variance for Differences in Post-treatment Discrimination Scores Between Placebo Groups

Source	Mean Square	df	F	Probability
Between (6 groups)	0.30	5	3.09	<.05
Within	0.10	33		

Statistical Treatments

Hypotheses I, II, and III

A Posttest-Only Placebo Group Model was employed to study main effects of the treatment on discrimination, communicated empathy (CE), and self-disclosure. This design can be shown graphically as in Figure 2.

FIGURE 2

Experimental	R_1	X	O_1
Placebo	R_2		O_2

The statistical test of significance used to detect differences between experimental and placebo group posttest discrimination scores was the t test for independent means. Similar comparisons were made between posttest CE scores using the t test for independent means. To detect differences between experimental and placebo group posttest self-disclosure scores, comparisons of mean scores for male friend, female friend, spouse, and colleague were made using t tests for independent means.

Hypothesis IV

To test the significance of the correlation between level of CE and total self-disclosure, a one-tailed correlated t test was applied to determine whether the correlational relationship found differed significantly from zero in the positive direction.

Questions I and II

Comparison of mean CE scores, between subjects in high scoring trainer groups and subjects in low scoring trainer groups, was made using the independent t test. Similarly for Hypothesis II, comparison of mean discrimination scores, between subjects in low scoring trainer groups and subjects in high scoring trainer groups, was made using the t test for independent means.

Question III

To test the significance of the correlation between level of CE and level of discrimination, a correlated t test was applied to determine if the correlational relationship found to exist differed significantly from zero.

Limitations of this Investigation

This thesis was restricted to the development of a manual outlining a Systematic Training Program to be followed in training individuals to function at a facilitative level of empathy and the evaluation of the effectiveness of the Systematic Training Program on the level of facilitative functioning.

The variables under study are difficult to measure. The instruments chosen are among the most reliable for the purpose. The validity and reliability of the findings depends to a large extent upon whether the response ratings of the Standard Communication Index are valid and reliable.

Every effort was made to reduce rater and experimenter bias in collecting and analyzing the data of this investigation. The raters, after demonstrating expertise in rating responses according to the Scale for the Measurement of Empathy in Interpersonal Processes, used a "blind analysis" procedure in rating the number coded responses. On the dimension of self-disclosure, it may be argued that the subjects would not want to honestly report areas of self-disclosure. It was for this reason that anonymity was assured and strictly maintained in the data collection procedure. Each subject was allowed to pick up a number coded brown envelope containing the three questionnaires (which were also number coded) from a pile that corresponded to his group number. He completed the questionnaires in the specified order and returned them in the brown envelope.

The sample was composed of individuals who attended two communication workshops, in the months of January and February, 1972, sponsored by the Division of Community Psychiatry in Edmonton, Alberta. Even though every effort was made to obtain a representative sample, this limitation does decrease the generalizability of findings to similar samples. However, it was thought to be more desirable to use a sample of individuals who were actually working in applied areas than to use a carefully selected and controlled sample of individuals from the University. The intent of the investigator was to carry out applied research that would have implications for the training of individuals in

social service field work. Another limitation that generates from the investigator's desire to use a sample involved in field work is the short period of time available. By using another sample it may have been possible to lengthen the treatment time. A minimum amount of time was used, but again, from the investigator's point of view the use of the present sample was more desirable than an extended treatment period with a less desirable sample.

Another limitation of the study is found in the contaminating effects of the twelve different trainers. The use of assorted trainers posed the problem of the effects of their personalities and their unique group leadership styles. In an effort to make the trainer effect minimal proportional stratified sampling procedures were used in assigning trainers to the two treatments.

CHAPTER V

Results

Overview

The major purpose of the present investigation was two-fold:

1. The development of a manual outlining a Systematic Training Program to be followed in training individuals to discriminate facilitative levels of interpersonal functioning and to communicate at a facilitative level of empathy.

2. The experimental evaluation of the Systematic Training Program through an investigation of the effects on discrimination, communication, and self-disclosure, associated with participation in a systematic training group as contrasted with participation in a human relations training group.

In this section the results derived from testing the four major hypotheses as well as the secondary questions are presented. Hence, the results observed for differences in discrimination ability, communicated empathy, level of self-disclosure to target-persons, relationship between discrimination and communication ability, and relationship between group leader and group participants on discrimination and communication ability are described. A discussion

of the various results has been placed in Chapter VI along with the implications for future research.

Results of Hypothesis Testing

Hypothesis 1

The Discrimination Index was employed to determine whether, as a function of the STP, the experimental group would discriminate "facilitative" responses more effectively than the placebo group. Subjects taking this test rate responses to 16 client stimuli expressions on a 1 to 5 scale. These ratings are then subtracted from a scoring key of expert ratings (Carkhuff, 1969a) and a mean absolute Deviation Score is calculated for each subject. Low mean Deviation Scores such as .4 or less are considered as evidence of being able to show expertise in recognizing facilitative responses.

In the present investigation total experimental group (N=32) and total placebo group (N=39) means were used as the basic observations². The posttest mean Deviation Scores and standard deviations obtained by the experimental and placebo groups on discrimination are reported in Table 12.

²The sample size was decreased from 77 to 71 on the DI due to the fact that 5 subjects in the experimental group and one subject in the placebo group completed the instrument incorrectly or missed pages.

TABLE 12
Mean Deviation Discrimination Scores of Experimental and
Placebo Groups

Group	Mean	S.D.
Experimental	0.70	0.21
Placebo	0.97	0.30

The t test for independent means was used to test the significance of the difference between the experimental and placebo group means. The results are reported in Table 13.

TABLE 13
Results of t Test on Experimental and Placebo Group
Discrimination Scores

Group	N	Mean	Adj. df	t'	Probability
Experimental	32	0.70	67.65 ^a	4.348	<.01*
Placebo	39	0.97			

^a Adjusted using Welch t Prime Adjustment

* One-tailed test

It should be noted that in Table 13 the degrees of freedom were adjusted using the Welch t Prime Adjustment. The procedure was followed when it was noted that the difference between the population variances approached significance ($p=.05087$). The t test for the significance of difference between means assumes equality of the population variances.

The highly significant t ratio of 4.348 ($p < .01$) shown in Table 13 indicated that the two treatment conditions were exerting a differential effect. As indicated by a discrimination score of .70 the experimental group showed evidence of rating facilitative responses more effectively than did the placebo group.

The hypothesis that participants in a systematic training group are better discriminators of facilitative responses than participants in a human relations training group was confirmed by the data.

Hypothesis II

The Standard Communication Index was used to determine whether, as a function of the STP, the experimental group would score higher on communicated empathy than the placebo group. The ratings received on each of the sixteen responses of the SCI were summed for each subject and then divided by sixteen to obtain a mean communicated empathy score. The total experimental and total placebo group means were used as the basic observations. The means and standard deviations are presented in Table 14.

TABLE 14

Communicated Empathy Means and Standard Deviations for
Experimental and Placebo Groups

Group	Mean	S.D.
Experimental	2.40	0.42
Placebo	1.79	0.45

The results show that a difference existed between the experimental and placebo group means. According to Carkhuff, the minimal level for facilitative empathic communication is a 3.0 rating on a given response. Hence, on the 16 item SCI an average score of 48 would be required to demonstrate that the "average" member was responding at the minimally facilitative level. In this investigation the post-treatment average response level for subjects in the Systematic Training Group was 2.4, an average score of 38.4, while the average for subjects in the Human Relations Training Group was only 1.79, an average score of 28.73. A difference of 9.64 points existed between the groups.

The t test for independent means was used to determine whether the observed difference was significant. The results are reported in Table 15.

TABLE 15

Results of t Test on Experimental and Placebo Group
Communicated Empathy Scores

Group	N	Mean	df	t	Probability
Experimental	37	2.40	75	-6.103	<.01*
Placebo	40	1.79			

* one-tailed test

The highly significant t ratio of -6.103 ($p < .01$) shown in Table 15 indicated that the two treatment conditions are exerting a differential effect. As indicated by the average

response level the experimental group showed evidence of communicating empathy at a significantly higher level than the placebo group.

The hypothesis that participants in a systematic training group score higher on communicated empathy than participants in a human relations training group was confirmed by the data.

Hypothesis III

Jourard's Self Disclosure Questionnaire was used to determine whether participants in a systematic training group would be more disclosing than participants in a human relations training group. It was hypothesized that a post-treatment test of self-disclosure would show differences in reported disclosures to male friend, female friend, spouse and colleague targets.

The SDQ raw data were transformed into male friend, female friend, spouse and colleague target total scores across all aspects of self-disclosure. Group means were computed for the experimental and placebo treatment for male friend, female friend, spouse and colleague targets.

The t test for independent means was used to determine whether observed differences in reported disclosures to target persons were significant. A summary of the results for male friend (N=35,33), female friend (N=35,33), and colleague (N=35,33) targets is reported in Table 16.

Table 17 describes the results for the spouse target which involved a different sample size.

TABLE 16

Summary of t Tests Upon Rate of Self-Disclosure to Selected Targets

Group	N	Male Friend			Female Friend			Colleague		
		Mean	t	p	Mean	t	p	Mean	t	p
Experimental	33	62.48	0.241	ns	71.76	-0.517	ns	50.82	0.30	ns
Placebo	35	63.89			68.83			52.26		

TABLE 17

Results of t Test on Rate of Self-Disclosure to Spouse Target

Group	N	Mean	df	t	Probability
Experimental	24	101.21	47	-0.477	N.S.
Placebo	25	98.96			

According to Table 16,³ the differences in self-disclosure to male friend, female friend, and colleague targets, between the experimental and placebo groups, was not significant. Likewise, in Table 17 it is noted that the difference in self-disclosure to the spouse target, between the experimental and placebo groups, was not significant.

The hypothesis that participants in a systematic training group will be more disclosing to male friend, female friend, colleague and spouse targets than participants in a human relations group was not confirmed by the data.

Hypothesis IV

It was predicted that a positive relationship would be found between total self-disclosure rate and level of communicated empathy.

The raw data from the SDQ were transformed into six scores for each subject; a male friend target score (N=68), a female friend target score (N=68), a colleague target score (N=68), a client target score (N=63), a spouse target score (N=49), and a total score for each of the 47 subjects with no missing data.

³The sample size was decreased from 77 to 68 on the SDQ for male friend, female friend and colleague targets due to 9 subjects not completing the questionnaire or completing it incorrectly. The sample size for the spouse target was decreased to 49 due to 19 subjects being single and 9 subjects not completing the questionnaire or completing it incorrectly.

The raw data of the SCI were transformed into a mean communicated empathy score for each of the 68 subjects who completed the SDQ.

The Pearson product-moment correlation coefficient between the total self-disclosure score and the mean communicated empathy score for 47 subjects with no missing data was found. In addition, the Pearson product-moment correlation coefficient between the total self-disclosure score on male friend, female friend and colleague targets (N=68) and the mean communicated empathy score was found.

The one-tailed t test for correlated data was applied to determine if the correlational relationships found differed significantly from zero in the positive direction. A summary of the results is presented in Table 18.

TABLE 18
Relationship Between Self-Disclosure and
Communicated Empathy

Variable 1	Variable 2	N	r	p
Total SD. to male friend, female friend, colleague	Communicated Empathy	68	.10	ns
Total SD. to male friend, female friend, colleague, spouse, client	Communicated Empathy	47	.08	ns

No significant relationship was found to exist between self-disclosure to male friend, female friend and colleague

targets combined and level of communicated empathy for the total sample (N=68).

In the case of the total sample with data on all targets (N=47), no significant relationship was found between self-disclosure rate and level of communicated empathy.

The hypothesis that self-disclosure, as measured by the SDQ, would be positively correlated with level of communicated empathy, as measured by the SCI, was not confirmed by the data.

Secondary Questions

Question 1

In an attempt to determine the relationship between the level of communicated empathy of the experimental group trainers and the level of communicated empathy of experimental group participants, the mean CE score of two groups with trainers with the highest CE scores was compared with the CE score of two groups with trainers with the lowest CE scores. The results of a two-tailed t test for independent means is described in Table 19. The difference between the mean CE scores of the high and low trainer groups was not significant.

TABLE 19

Results of t Test for Differences Between Communicated
Empathy of High and Low Trainer Groups

Group	N	Mean	S.D.	Adj. df	t'	Probability
High Trainer	13	2.50	0.47	18.36 ^a	0.56	ns
Low Trainer	9	2.58	0.23			

^aAdjusted using Welch t Prime Adjustment

Hence, the data suggest that participants in a systematic training group with trainers with low CE scores do as well on CE as participants in a group with trainers with high CE scores.

It should be noted that in Table 19 the degrees of freedom were adjusted using the Welch t Prime Adjustment. This procedure became necessary when it was discovered that the assumption of homogeneity of variance, underlying the use of the t test, could not be met.

Question 11

The mean Discrimination Score of two groups with trainers with low discrimination scores was compared with the mean Discrimination Score of two groups with trainers with high discrimination scores.⁴ The results of a two-tailed t test for independent means is described in Table

⁴A low discrimination score is a better score.

20. The difference between the mean Discrimination Scores of the high and low trainer groups was not significant. Hence, the data suggest that participants in a Systematic Training Group with trainers with high discrimination scores do as well on discrimination as participants in a group with trainers with low discrimination scores.

TABLE 20

Results of t Test for Differences Between Discrimination Scores of High and Low Trainer Groups

Group	N	Mean	S.D.	df	t	Probability
Low Trainer	8	0.58	0.18	16	1.442	ns
High Trainer	10	0.69	0.14			

Question III

In order to determine whether a relationship existed between the level of discrimination as measured by the DI and the level of communicated empathy as measured by the SCI, a scatter diagram was plotted for 71 subjects who completed both instruments. An inspection of the scatter diagram suggested that a negative relationship existed between the two variables. A Pearson product-moment correlation coefficient between the communicated empathy scores and the discrimination scores was then found.

A significant negative correlation ($r = -.737$, $p < .01$) was found between level of discrimination and level of

communicated empathy, as is described in Table 21.

TABLE 21
Relationship Between Discrimination and
Communicated Empathy

Variable 1	Variable 2	N	r	t	p
Discrimination	Communicated Empathy	71	-.737	-9.052	<.01

This finding suggests that as the communicated empathy score increases, the discrimination score decreases. In other words, good communicators are also good discriminators.

CHAPTER VI

Discussion and Implications

Discussion of Results of Hypothesis Testing

The results of the hypothesis testing will be discussed in light of the major purpose of the present investigation. The intention of the present investigator was to focus on the problem of developing, implementing, and evaluating a systematic program, designed to train individuals to discriminate facilitative levels of interpersonal functioning and to communicate at a facilitative level of empathy. The training program developed was carefully outlined in a manual which included the specific step-by-step procedures to be followed by the group trainer.

The major purpose of the experimental investigation was to assess the effectiveness of the Systematic Training Program. The Systematic Training Program was evaluated by investigating the effects on discrimination, communication, and self-disclosure associated with participation in a systematic training group as contrasted with participation in a human relations training group.

Effect of a Systematic Training Program on Discrimination

The data supported the initial primary hypothesis that participants in a Systematic Training group become better discriminators of facilitative levels of functioning than

participants in a human relations training group.

Individuals who participated in a systematic training group scored significantly better on discrimination, obtaining an average discrimination score of .70, than individuals who participated in a human relations training group who obtained an average discrimination score of .97.

Effect of a Systematic Training Program on Communication

Accurate empathy, as used in the present investigation, refers to an awareness or understanding of the thoughts and feelings of another person and the verbal facility to communicate this understanding. It was hypothesized that participants in a systematic training group, designed to train individuals to communicate empathy, score higher on communicated empathy than participants in a human relations training group. This hypothesis was supported by the data. The post-treatment average communicated empathy score for participants in the systematic training group was 2.4, while the average communicated empathy score for participants in the human relations training group was only 1.79.

Carkhuff (1969a) has claimed that training is successful if a group average of 2.5 is obtained on the SCI. The six systematic training groups obtained average communicated empathy scores of 2.17, 2.24, 2.42, 2.53, 2.59, and 2.65, resulting in an average communicated empathy score of 2.4.

If one accepts Carkhuff's standard for successful training, then the evidence gathered here suggests that the systematic training program was successful. On the other

hand, Carkhuff has stated that a level 3.0 response represents the minimal level to be facilitative. None of the training groups in this study achieved an average communicated empathy score of 3.0. Individual subjects, however, did receive ratings above 3.0 for given responses.

Carkhuff has also maintained that if the helper is providing the facilitative conditions at a measured level of less than 3.0 across all dimensions a subtractive or detracting effect occurs in the helping relationship. In support of this Carkhuff (1969a) has stated that "only helpers who are functioning above level 3.0 can offer uniformly positive gains in levels of functioning to the persons seeking help from them (p. 31)." However, it would appear that the 3.0 level is rather arbitrary and research evidence suggests that depending on the level of functioning of the helpee that a helper at less than a 3.0 level can be helpful. It can be reasonably argued that it would be better for helping personnel to function at 'high' rather than 'low' levels; but there is little support for advocating adoption of the 3.0 level as a cut off point, rather than, say, 2.5 or 3.5. Further research is required to explore this issue.

Effect of a Systematic Training Program on Self-Disclosure

The hypothesis that participants in a Systematic Training group would be more disclosing to male friend, female friend, spouse, and colleague targets than participants in a human relations training group was not

confirmed by the data. This finding is not as alarming as it might appear at first, given the fact that in responding to the SDQ subjects indicated the extent to which they had talked to each specified target person about the sixty listed items. Since the training program took place in a three-day workshop, the likelihood of participants having an opportunity to disclose more information to selected targets was not great. Hence, in most cases the writer suspects that subjects responded to the SDQ with past behavior, i.e. the amount of disclosure that took place prior to the workshop. With an instrument like the SDQ, which is essentially measuring behavior that has already taken place, it is necessary to allow subjects an opportunity to become more disclosing to selected targets. Hence, the present writer questions the use of the SDQ in a short workshop where the opportunity for disclosure to selected targets is limited.

Scott's (1969) study lends support to this argument. In a study of the effect of sensitivity training upon self-disclosure rate, he found that sensitivity group participants (n=26) increased significantly their amount of self-disclosure to the male friend and female friend targets. Although there was an increase in the amount of self-disclosure by participants in a control and risky-shift group, neither reached significance. Although the training time was approximately the same as the training time in the present study, training took place over an eight week time

period which provided an opportunity for increased self-disclosure to target persons. In addition, Scott (1969) makes the point that the targets of increased self-disclosure were not participants in the group. Hence, it seems more likely that significant differences in self-disclosure rate are likely to be found when the workshop is continued over several weeks duration. In the present investigation, however, it was more desirable to use active field workers as participants and make use of a three-day workshop format, than to use a "less desirable" sample and a weekly training session format.

Following the argument that an opportunity for self-disclosure is required, differences in level of self-disclosure might be expected in a follow-up testing one month after a continuous workshop. Follow-up testing, however, was not a possibility due to the nature of the sample used in this investigation.

Another possible explanation of the finding that a significant difference in level of self-disclosure did not exist between the experimental and placebo groups relates to the treatments. It is possible that rate of self-disclosure was influenced by both treatments. Scott's (1969) study supports this argument since the sensitivity training treatment used in the study was very similar to the human relations training treatment of the present study. In order to determine the effect of human relations training or systematic training on self-disclosure a pre- and posttest

would be required to assess the changes in self-disclosure. A one month follow-up could answer the question since the posttest could be used as a pretest and the follow-up testing as a posttest. The present investigator is reluctant to conclude that self-disclosure is not affected by systematic training or human relations training, especially in the light of Scott's findings, and has suggested several possibilities for further research.

Relationship Between Self-Disclosure and Communicated Empathy

It was predicted that a positive relationship would exist between level of communicated empathy and total self-disclosure. The data did not support this prediction. Again it seems likely that the subjects in responding to the SDQ reported the extent to which they had talked to target persons about the sixty listed items prior to the workshop. The opportunity for behavior change via increased self-disclosure was not available until after the workshop. A follow-up testing might have demonstrated changes in self-disclosure with the resultant finding that high communicators were also high self-disclosers.

Scott's (1969) prediction that a significant positive relationship would exist between high total self-disclosure and high risk taking was not supported. He did, however, obtain the predicted result with his small sample of married males ($n=14$). The targets analyzed from the SDQ did not include spouses, but only male and female friends

and a total of all targets. A puzzling finding was a significant correlation ($r=.20$, $p<.05$) between amount of self-disclosure to the female friend target and low risk taking for single females. No significant relationship, however, was found to exist between the male friend target or total targets and risk taking for the total sample ($N=72$). Scott (1969) attempts to explain the significant correlation in terms of an edict that exists in our society, that men solve their own problems and do not share matters of personal concern with others for fear of appearing inadequate in the eyes of their peers. Women, however, are granted this privilege by being thought of as the weaker sex.

These findings suggest to the present investigator that further research on the SDQ is required. It may be that the SDQ is measuring something other than self-disclosure; or, with regard to the present research, that the SDQ is measuring something different from what Carkhuff (1969a) is measuring when he refers to self-disclosure.

As was mentioned earlier, the validity of the SDQ has not been clearly established. These findings suggest that more research is required to establish the relationship between scores on the SCI and actual self-disclosing behavior. Carkhuff (1969a) has developed a scale for the measurement of self-disclosure which is used to rate responses to the SCI. It would be useful to relate scores on this scale with scores obtained on the SDQ in order to

establish the correlation between the two instruments.

One could speculate that the data obtained on the SDQ represent a measure of the level of self-disclosure of subjects prior to the workshop and as such provide a pre-test of the level of self-disclosure. Following this line of reasoning, one can tentatively conclude that the random assignment of subjects to treatments was valid and that significant differences did not exist between treatment groups prior to the workshop.

Discussion of Results of Secondary Questions

Relationship Between Communicated Empathy of Trainers and Group Participants

An attempt was made to explore the relationship between the trainer level of communicated empathy and the level of communicated empathy of group participants. Carkhuff (1969a) has maintained that in the teaching of empathic communication it is essential that the trainer act as a high functioning model. On the trainer's level of functioning Carkhuff has made the following remarks:

In general, the results of all programs may be summarized as follows: those trainees whose trainers were functioning (1) above minimally facilitative levels (level 3) and (2) approximately one level or more above the trainees demonstrated the most positive changes (1969a, p. 155).

He goes on to suggest that a trainer who comes close to meeting one of these conditions may make a contribution, albeit a limited one, to the growth of his trainees. On

the other hand, those trainers who are functioning neither at minimally facilitative levels nor significantly above their trainees have nothing to offer their trainees, while those who are functioning at levels lower than their trainees can promise their trainees no change, or deteriorative results.

In an attempt to explore this issue the mean CE score of two groups with trainers with high CE scores was compared with the mean CE score of two groups with trainers with low CE scores. The CE scores of the low trainers were 1.97 and 2.31 while the CE scores of the high trainers were 2.98 and 2.92. The difference between the mean CE scores of the high and low trainer groups was not significant. In fact, the participants in the two groups, with trainers with low CE scores, all achieved CE scores that were higher than the CE scores of their respective trainers. These findings contradict Carkhuff's claim that a high functioning model is a necessity. This finding would also suggest that the Systematic Training Program can effect significant changes in communicated empathy regardless of the level of communicated empathy of the person using it. Further research is required to determine the validity of this claim.

Park (1972) reported similar findings in two studies, a main study and a follow-up study. Although he did not measure the communicated empathy of his trainers, the subjective impression of course instructors was that both trainers rarely demonstrated responses higher than level

3.0. Data gathered with both Flander's Interaction Analysis system and Bales' Interaction Process Analysis system suggested that the trainer, in the main study, did not serve as a high functioning model with respect to the empathy dimension. Anderson (1971) analyzed the data available from those systems and concluded that the trainer did not act as a model for interpersonal skills. Anderson also concluded that the Bales IPA data indicated that the social-emotional climate of the groups was predominantly negative and a large number of acts of negativism were received by the instructor from every student. Considering that the trainers did not serve as high functioning models, Park's (1972) finding that several subjects did achieve average responses higher than 3.0 on the Human Relations Video-Tape contradicts Carkhuff's claim that a high functioning model is a necessity.

Relationship Between Level of Discrimination of Trainers and Group Participants

An attempt was made to explore the relationship between the trainer level of discrimination and the level of discrimination of group participants. The mean Discrimination Score of two groups with trainers with high-level discrimination scores (lowest scores) was compared with the mean Discrimination Score of two groups with trainers with low-level discrimination scores (highest scores). The discrimination scores of the high-level trainers were .20 and .31 while the discrimination scores of the low-level

trainers were .59 and .59. Low mean deviation Discrimination Scores of .4 or less are considered as evidence of being able to show expertise in recognizing facilitative responses. The difference between the mean Discrimination Scores of the high and low trainer groups was not significant.

This finding would suggest that the Systematic Training program can affect participants' level of discrimination of facilitative dimensions regardless of the level of discrimination of the trainer using it. Admittedly, the low level trainers approached a discrimination score that was very close to an expert discrimination score. Further research is required to determine whether this finding can be replicated with trainers who are poor discriminators.

Relationship Between Level of Discrimination and Communicated Empathy

The correlation between level of discrimination and level of communicated empathy was significant indicating a linear relationship between the two variables. In the present study a significant negative correlation ($r = -.737$, $p < 0.1$) was found between the variables. Westwood (1972), in a study examining selected performance aspects indicated to be predictive of social-worker effectiveness, also found a significant negative correlation between communication and discrimination ($r = -.515$, $p < .01$).

Further Analyses

It could be argued, in critiquing the findings of this investigation, that in analyzing the data subjects were treated as the independent unit of measure as opposed to treating the groups as the independent unit. It was suspected that the highly significant differences between experimental and placebo groups would be maintained if the groups were treated as the independent unit. In order to validate this hunch an analysis of variance was used to determine whether the differences between experimental and placebo groups on communication and discrimination were significant. With two groups only, the significance of the differences between means may be tested using either a t test or the analysis of variance since these procedures lead to the same result.

The results of an analysis of variance on post-treatment communicated empathy between the experimental and placebo groups are presented in Table 22.

TABLE 22

Results of Analysis of Variance for Differences Between
Posttreatment Communicated Empathy

Source	Sum of Squares	df	Mean Square	F	Probability
Between	1.13	1	1.13	18.675	<.01
Within	.61	10	.06		

The significant F ratio of 18.675 ($p < .01$) shown in Table 22 indicated that the experimental group scored higher on communicated empathy than the placebo group.

An analysis of variance on posttreatment discrimination scores between the experimental and placebo group was also carried out and the results are presented in Table 23.

TABLE 23

Results of Analysis of Variance for Differences Between
Posttreatment Discrimination Scores

Source	Sum of Squares	df	Mean Square	F	Probability
Between	.15	1	.15	5.544	<.05
Within	.27	10	.03		

The significant F ratio of 5.544 ($p < .05$) shown in Table 23 demonstrated that the experimental group scored higher on discrimination than the placebo group.

The results previously cited supported the original findings of this investigation.

Implications for Practice

The major finding of this investigation was that individuals who attended a systematic training group were functioning at higher levels of communicated empathy and discrimination on the posttest than individuals who

attended a human relations training group. As a consequence of the investigation a manual is available which outlines the Systematic Training Program to be followed by a trainer. This manual can now be used in a number of different settings and with different samples of people for further research and training. To date, the STP or portions of it have been used extensively by several different trainers with the following samples: lay counselors with little theoretical background, counselors with several years of experience, teachers, school counselors, student nurses, experienced psychiatric nurses, social workers, and high school students.

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Table of Helpee Responses

Respondent
Number

Expressions

DIRECTIONS

The following excerpts represent 16 stimulus expressions; that is expressions by a helpee of feeling and content in different problem areas. In this case, the same helpee is involved in all instances.

You may conceive of this helpee not necessarily as a formal client but simply as a person who has come to you in time of need. We would like you to respond as you would if someone came to you seeking assistance in a time of distress. Write down your response after the number 1. In making your responses keep in mind those that the helpee can use effectively in his own life.

APPENDIX A

In summary, formulate the person who comes to you for help. The following range of helpee expressions can easily come in the first contact or first few contacts; however, do not. The Standard Communication Index, Step 3, means previous expressions. Response to the helpee's immediate expression.

Carkhuff Communication of Helper Responses
to Helpee Stimulus Expressions

DIRECTIONS

The following excerpts represent 16 stimulus expressions; that is expressions by a helpee of feeling and content in different problem areas. In this case, the same helpee is involved in all instances.

You may conceive of this helpee not necessarily as a formal client but simply as a person who has come to you in time of need. We would like you to respond as you would if someone came to you seeking assistance in a time of distress. Write down your response after the number 1. In formulating your responses keep in mind those that the helpee can use effectively in his own life.

In summary, formulate responses to the person who has come to you for help. The following range of helpee expressions can easily come in the first contact or first few contacts; however, do not attempt to relate any one expression to a previous expression. Simply try to formulate a meaningful response to the helpee's immediate expression.

Date.....

COMMUNICATION ASSESSMENTS

Excerpt 1

HELPEE: Gee, I'm so disappointed. I thought we could get along together and you could help me. We don't seem to be getting anywhere. You don't understand me. You don't know I'm here. I don't even think you care for me. You don't hear me when I talk. You seem to be somewhere else. Your responses are independent of anything I have to say. I don't know where to turn. I'm must so--doggone it-- I don't know what I'm going to do, but I know you can't help me. There just is no hope.

1. RESPONSE: _____

Excerpt 2

HELPEE: Who do you think you are? You call yourself a therapist! Damn, here I am spilling my guts out and all you do is look at the clock. You don't hear what I say. Your responses are not attuned to what I'm saying. I never heard of such therapy. You are supposed to be helping me. You are so wrapped up in your world you don't hear a thing I'm saying. You don't give me the time. The minute the hour is up you push me out the door whether I have something important to say or not. I--ah--it makes me so God damn mad!

1. RESPONSE: _____

Excerpt 3

HELPEE: They wave that degree up like it's a pot of gold at the end of the rainbow. I used to think that, too, until I tried it. I'm happy being a housewife; I don't care to get a degree. But the people I associate with, the first thing they ask is where did you get your degree. I answer, "I don't have a degree." Christ, they look at you like you are

some sort of a freak, some backwoodsman your husband picked up along the way. They actually believe that people with degrees are better. In fact, I think they are worse. I've found a lot of people without degrees that are a hell of a lot smarter than these people. They think that just because they have degrees they are something special. These poor kids that think they have to go to college or they are ruined. It seems that we are trying to perpetrate a fraud on these kids. If no degree, they think they will end up digging ditches the rest of their lives. They are looked down upon. That makes me sick.

1. RESPONSE: _____

Excerpt 4

HELPEE: It's not an easy thing to talk about. I guess the heart of the problem is sort of a sexual problem. I never thought I would have this sort of problem. But I find myself not getting the fulfillment I used to. It's not as enjoyable--for my husband either, although we don't discuss it. I used to enjoy and look forward to making love. I used to have an orgasm but I don't any more. I can't remember the last time I was satisfied. I find myself being attracted to other men and wondering what it would be like to go to bed with them. I don't know what this means. Is this symptomatic of our whole relationship as a marriage? Is something wrong with me or us?

1. RESPONSE: _____

Excerpt 5

HELPEE: I'm so pleased with the kids. They are doing just marvelously. They have done so well at school and at home; they get along together. It's amazing. I never thought they would. They seem a little older. They play together better and they enjoy

each other and I enjoy them. Life has become so much easier. It's really a joy to raise three boys. I didn't think it would be. I'm just so pleased and hopeful for the future. For them and for us. It's just great! I can't believe it. It's marvelous.

1. RESPONSE: _____

Excerpt 6

HELPEE: I finally found somebody I can really get along with. There is no pretentiousness about them at all. They are real and they understand me. I can be myself with them. I don't have to worry about what I say and that they might take me wrong, because I do sometimes say things that don't come out the way that I want them to. I don't have to worry that they are going to criticize me. They are just marvelous people! I just can't wait to be with them. For once I actually enjoy going out and interacting. I didn't think I could ever find people like this again. I can really be myself. It's such a wonderful feeling not be have people criticizing you for everything you say that doesn't agree with them. They are warm and understanding and I just love them! It's just marvelous.

1. RESPONSE: _____

Excerpt 7

HELPEE: I love my children and my husband and I like doing most household things. They get boring at times but on the whole I think it can be a very rewarding thing at times. I don't miss working, going to the office every day. Most women complain of being just a housewife and just a mother. But then, again, I wonder if there is more for me. Others say there has to be. I really don't know.

1. RESPONSE: _____

Excerpt 8

HELPEE: Silence. (Moving about in chair)

1. RESPONSE: _____

Excerpt 9

HELPEE: I'm really excited the way things are going at home with my husband. It's just amazing. We get along great together now. Sexually, I didn't know we could be that happy. I didn't know anyone could be that happy. It's just marvelous! I'm just so pleased, I don't know what else to say.

1. RESPONSE: _____

Excerpt 10

HELPEE: I get so frustrated and furious with my daughter. I just don't know what to do with her. She is bright and sensitive, but damn, she has some characteristics that make me so on edge. I can't handle it sometimes. She just--I feel myself getting more and more angry! She won't do what you tell her to. She tests limits like mad. I scream and yell and lose control and think there is something wrong with me--I'm not an understanding mother or something. Damn! What potential! What she could do with what she has. There are times she doesn't need what she's got. She gets by too cheaply. I just don't know what to do with

her. Then she can be so nice and then, boy, she can be as ornery as she can be. And then I scream and yell and I'm about ready to slam her across the room. I don't like to feel this way. I don't know what to do with it.

1. RESPONSE: _____

Excerpt 11

HELPEE: He is ridiculous! Everything has to be done when he wants to do it. The way he wants it done. It's as if nobody else exists. It's everything he wants to do. There is a range of things I have to do. Not just be a housewife and take care of the kids. Oh no. I have to do his typing for him, errands for him. If I don't do it right away, I'm stupid-- I'm not a good wife or something stupid like that. I have an identity of my own and I'm not going to have it wrapped up in him. It makes me--it infuriates me! I want to punch him right in the mouth. What am I going to do? Who does he think he is, anyway?

1. RESPONSE: _____

Excerpt 12

HELPEE: I'm really excited! We are going to California. I'm going to have a second lease on life. I found a marvelous job. It's great! It's so great, I can't believe it's true--it's so great! I have a secretarial job. I can be a mother and can have a part time job which I think I will enjoy very much. I can be home when the kids get home from school. It's too good to be true. It's so exciting. New horizons are unfolding. I just can't wait to get started. It's great!

1. RESPONSE: _____

Excerpt 13

HELPEE: I'm so thrilled to have found a counselor like you. I didn't know any existed. You seem to understand me so well. It's just great! I feel like I'm coming alive again. I have not felt like this in so long.

1. RESPONSE: _____

Excerpt 14

HELPEE: I don't know if I am right or wrong feeling the way I do. But I find myself withdrawing from people. I don't seem to socialize and play their stupid little games any more. I get upset and come home depressed and have headaches. It seems all so superficial. Everybody said "Isn't she wonderful. She gets along with everybody. Everybody likes her." I used to think that was something to be really proud of, but that was who I was at that time. I had no depth. I was what the crowd wanted me to be--the particular group I was with.

1. RESPONSE: _____

Excerpt 15

HELPEE: Gee, those people! Who do they think they are? I just can't stand interacting with them any more. Just a bunch of phonies. They leave me so frustrated. They make me so anxious, I get angry at myself. I don't even want to be bothered with them any more. I just wish I could be honest with them and tell them all to go to hell! But I guess I just can't do it.

1. RESPONSE: _____

Excerpt 16

HELPEE: Sometimes I question my adequacy of raising three boys, especially the baby. I call him the baby--well, he is the last. I can't have any more. So I know I kept him a baby longer than the others. He won't let anyone else do things for him. If someone else opens the door he says he wants Mummy to do it. If he closes the door, I have to open it. I encourage this. I do it. I don't know if this is right or wrong. He insists on sleeping with me every night and I allow it. And he says when he won't do it any more. Right now he is my baby and I don't discourage this much. I don't know if this comes out of my needs or if I'm making too much out of the situation or if this will handicap him when he goes to school--breaking away from Mamma. Is it going to be a traumatic experience for him? Is it something I'm creating for him? I do worry more about my children than I think most mothers do.

1. RESPONSE: _____

APPENDIX B

- APPENDIX B-1 A Scale for the Measurement of Empathy in
 Interpersonal Processes - R.R. Carkhuff
- APPENDIX B-2 A Scale for the Measurement of Accurate
 Empathy - C.B. Truax
- APPENDIX B-3 A Schematic Presentation of a Scale for the
 Measurement of Accurate Empathy
- APPENDIX B-4 Comparison of Truax and Carkhuff Scales

APPENDIX B-1

EMPATHIC UNDERSTANDING IN INTERPERSONAL PROCESSES:

A SCALE FOR MEASUREMENT

Level 1

The verbal and behavioral expressions of the first person either do not attend to or detract significantly from the verbal and behavioral expressions of the second person(s) in that they communicate significantly less of the second person's feelings than the second person had communicated himself.

EXAMPLES: The first person communicates no awareness of even the most obvious, expressed surface feelings of the second person. The first person may be bored or uninterested or simply operating from a preconceived frame of reference which totally excludes that of the other person(s).

In summary, the first person does everything but express that he is listening, understanding, or being sensitive to even the feelings of the other person in such a way as to detract significantly from the communications of the second person.

Level 2

While the first person responds to the expressed feelings of the second person(s), he does so in such a way that he subtracts noticeable affect from the communications of the second person.

EXAMPLES: The first person may communicate some awareness of obvious surface feelings of the second person, but his communications drain off a level of the affect and distort the level of meaning. The first person may communicate his own ideas of what may be going on, but these are not congruent with the expressions of the second person.

In summary, the first person tends to respond to other than what the second person is expressing or indicating.

Level 3

The expressions of the first person in response to the expressed feelings of the second person(s) are essentially interchangeable with those of the second person in that they

express essentially the same affect and meaning.

EXAMPLE: The first person responds with accurate understanding of the surface feelings of the second person but may not respond to or may misinterpret the deeper feelings.

In summary, the first person is responding so as to neither subtract from nor add to the expressions of the second person; but he does not respond accurately to how that person really feels beneath the surface feelings. Level 3 constitutes the minimal level of facilitative interpersonal functioning.

Level 4

The responses of the first person add noticeably to the expressions of the second person(s) in such a way as to express feelings of level deeper than the second person was able to express himself.

EXAMPLE: The facilitator communicates his understanding of the expressions of the second person at a level deeper than they were expressed, and thus enables the second person to experience and/or express feelings he was unable to express previously.

In summary, the facilitator's responses add deeper feeling and meaning to the expressions of the second person.

Level 5

The first person's responses add significantly to the feeling and meaning of the expressions of the second person(s) in such a way as to (1) accurately express feelings levels below what the person himself was able to express or (2) in the event of on going deep self-exploration on the second person's part, to be fully with him in his deepest moments.

EXAMPLES: The facilitator responds with accuracy to all of the person's deeper as well as surface feelings. He is "together" with the second person or "tuned in" on his wave length. The facilitator and the other person might proceed together to explore previously unexplored areas of human existence.

In summary, the facilitator is responding with full awareness of who the other person is and a comprehensive and accurate empathic understanding of his deepest feelings.

APPENDIX B-2

A SCALE FOR THE MEASUREMENT OF ACCURATE EMPATHY

Stage 1

Therapist seems completely unaware of even the most conspicuous of the client's feelings; his responses are not appropriate to the mood and content of the client's statements. There is no determinable quality of empathy, and hence no accuracy whatsoever. The therapist may be bored and disinterested or actively offering advice, but he is not communicating an awareness of the client's current feelings.

State 2

Therapist shows an almost negligible degree of accuracy in his responses, and that only toward the client's most obvious feelings. Any emotions which are not clearly defined he tends to ignore altogether. He may be correctly sensitive to obvious feelings and yet misunderstand much of what the client is really trying to say. By his response he may block off or may misdirect the patient. Stage 2 is distinguishable from Stage 3 in that the therapist ignores feelings rather than displaying an inability to understand them.

Stage 3

Therapist often responds accurately to client's more exposed feelings. He also displays concern for the deeper, more hidden feelings, which he seems to sense must be present, though he does not understand their nature or sense their meaning to the patient.

Stage 4

Therapist usually responds accurately to the client's more obvious feelings and occasionally recognizes some that are less apparent. In the process of this tentative probing, however, he may misinterpret some present feelings and anticipate some which are not current. Sensitivity and awareness do exist in the therapist, but he is not entirely "with" the patient in the current situation or experience. The desire and effort to understand are both present, but his accuracy is low. This stage is distinguishable from Stage 3 in that the therapist does occasionally recognize less apparent feelings. He also may seem to have a theory about the patient and may even know how or why the patient feels a particular way, but he is definitely not "with" the patient. In short, the therapist may be diagnostically accurate, but not emphatically accurate in his sensitivity to the patient's current feelings.

Stage 5

Therapist accurately responds to all of the client's more readily discernible feelings. He also shows awareness of many less evident feelings and experiences, but he tends to be somewhat inaccurate in his understanding of these. However, when he does not understand completely, this lack of complete understanding is communicated without an anticipatory or jarring note. His misunderstandings are not disruptive by their tentative nature. Sometimes in Stage 5 the therapist simply communicates his awareness of the problem of understanding another person's inner world. This stage is the midpoint of the continuum of accurate empathy.

Stage 6

Therapist recognizes most of the client's present feelings, including those which are not readily apparent. Although he understands their content, he sometimes tends to misjudge the intensity of these veiled feelings, so that his responses are not always accurately suited to the exact mood of the client. The therapist does deal directly with feelings the patient is currently experiencing although he may misjudge the intensity of those less apparent. Although sensing the feelings, he often is unable to communicate meaning to them. In contrast to Stage 7, the therapist's statements contain an almost static quality in the sense that he handles those feelings that the patient offers but does not bring new elements to life. He is "with" the client but doesn't encourage exploration. His manner of communicating his understanding is such that he makes of it a finished thing.

Stage 7

Therapist responds accurately to most of the client's present feelings and shows awareness of the precise intensity of most of the underlying emotions. However, his responses move only slightly beyond the client's own awareness, so that feelings may be present which neither the client nor therapist recognizes. The therapist initiates moves toward more emotionally laden material, and may communicate simply that he and the patient are moving towards more emotionally significant material. Stage 7 is distinguishable from Stage 6 in that often the therapist's response is a kind of precise pointing of the finger toward emotionally significant material.

Stage 8

Therapist accurately interprets all the client's present, acknowledged feelings. He also uncovers the most deeply shrouded of the client's feelings, voicing meanings in the client's experience of which the client is scarcely

aware. Since the therapist must necessarily utilize a method of trial and error in the new uncharted areas, there are minor flaws in the accuracy of his understanding, but these inaccuracies are held tentatively. With sensitivity and accuracy he moves into feelings and experiences that the client has only hinted at. The therapist offers specific explanations or additions to the patient's understanding so that underlying emotions are both pointed out and specifically talked about. The content that comes to life may be new but it is not alien.

Although the therapist in Stage 8 makes mistakes, these mistakes are not jarring, because they are covered by the tentative character of the response. Also, this therapist is sensitive to his mistakes and quickly changes his response in midstream, indicating that he has recognized what is being talked about and what the patient is seeking in his own explorations. The therapist reflects a togetherness with the patient in tentative trial and error exploration. His voice tone reflects the seriousness and depth of his empathic grasp.

Stage 9

The therapist in this stage unerringly responds to the client's full range of feelings in their exact intensity. Without hesitation, he recognizes each emotional nuance and communicates an understanding of every deepest feeling. He is completely attuned to the client's shifting emotional content; he senses each of the client's feelings and reflects them in his words and voice. With sensitive accuracy, he expands the client's hints into a full-scale (though tentative) elaboration of feeling or experience. He shows precision both in understanding and in communication of this understanding, and expresses and experiences them without hesitancy.

APPENDIX B-3

**A Schematic Presentation of
A Scale for the Measurement of Accurate Empathy^a**

LEVEL OF CLIENT FEELINGS PERCEIVED AND REFLECTED BY THE THERAPIST	DEGREES OF THERAPIST ACCURACY IN THE PERCEPTION OF CLIENT FEELINGS AT THE STAGES OF THE ACCURATE EMPATHY SCALE								
	Stage 1	Stage 2	Stage 3	Stage 4	Stage 5	Stage 6	Stage 7	Stage 8	Stage 9
Present obvious feelings	ignores	understands poorly	often accurate	usually accurate	accurate	accurate	accurate	accurate	unhesitating flawless accuracy
Veiled feelings		ignores	senses but under- stands poorly	accuracy very low but trying	sensitive but somewhat inaccurate tentative interpre- tation	accurate toward content but not intensity	accurate	accurate	
Preconscious feelings						ignores	a precise "pointing toward"	sensitive trial-and- error exploration	

a. This schematic presentation of levels of accurate empathy, developed by Richard A. Mullah, University of Florida, has been found useful for both research raters and therapist trainees. It provides a brief summary of the table scale, and is intended to facilitate the training of raters in the use of the scale.

APPENDIX B-4

COMPARISON OF TRUAX AND CARKHUFF EMPATHY SCALES

Truax Scale	Obvious Feelings	Carkhuff Scale
Stage 1	ignores	Level 1.0
Stage 2	understands poorly	Level 1.5
Stage 3	often accurate	Level 2.0
Stage 4	usually accurate	Level 2.5
Stage 5	accurate	Level 3.0
Stage 6	accurate	Level 3.5
Stage 7	accurate	Level 4.0
Stage 8	accurate	Level 4.5
Stage 9	unhesitating flawless accuracy	Level 5.0

Carkhuff Discrimination of Helper Responses
to Helpee Stimulus Expressions

DIRECTIONS

The following excerpts involve a number of helpee stimulus expressions and in turn a number of helper responses. There are 16 expressions by helpees of problems, and in response to each expression there are four possible helper responses.

These helpees can be considered to be helpees in very early contacts. They may not be formal helpees. They may simply be people who sought the help of another person in a time of need. In this example the same helpee and the same helper are involved.

You may rate these excerpts keeping in mind that those helper responses which the helpee can employ most effectively are rated the highest.

The facilitator is a person who is living effectively himself and who discloses himself in a genuine and constructive fashion in response to others. He communicates an accurate empathic understanding and a respect for all of the feelings of other persons and guides discussions with those persons into specific feelings and experiences. He communicates confidence in what he is doing and is spontaneous and intense. In addition, while he is open and flexible in his relations with others, in his commitment to the welfare of the other person he is quite capable of active, assertive, and even confronting behavior when it is appropriate.

You will read a number of excerpts taken from therapy sessions. Rate each excerpt 1.0, 1.5, 2.0, 2.5, 3.0, 3.5, 4.0, 4.5, or 5.0, using the following continuum.

Assessing Discrimination

1.0	1.5	2.0	2.5	3.0	3.5	4.0	4.5	5.0
None of these conditions are communicated to any noticeable degree in the person.		Some of the conditions are communicated and some are not.		All of the conditions are communicated at a minimally facilitative level.		All of the conditions are communicated, and some are communicated fully.		All of the conditions are fully communicated simultaneously and continually.

Date.....

Excerpt 1

HELPEE: I love my children and my husband and I like doing most household things. They get boring at times but on the whole I think it can be a very rewarding thing at times. I don't miss working, going to the office every day. Most women complain of being just a housewife and just a mother. But, then, again, I wonder if there is more for me. Others say there has to be. I really don't know.

HELPER RESPONSES:

- _____ (1) Hmm. Who are these other people?
- _____ (2) So you find yourself raising a lot of questions about yourself—educationally, vocationally.
- _____ (3) Why are you dominated by what others see for you? If you are comfortable and enjoy being a housewife, then continue in this job. The role of mother, homemaker can be a full-time, self-satisfying job.
- _____ (4) While others raise these questions, these questions are real for you. You don't know if there is more out there for you. You don't know if you can find more fulfillment than you have.

Excerpt 2

HELPEE: I'm really excited the way things are going at home with my husband. It's just amazing! We get along great together now. Sexually, I didn't know we could be that happy. I didn't know anyone could be that happy. It's just marvelous! I'm just so pleased, I don't know what else to say.

HELPER RESPONSES:

- _____ (1) It's a wonderful feeling when things are going well maritally.
- _____ (2) It's really exciting to be alive again, to feel your body again, to be in love again.
- _____ (3) Is your husband aware of these changes?
- _____ (4) Now don't go overboard on this right now. There will be problems that lie ahead and during these periods that you have these problems I want you to remember well the bliss you experienced in this moment in time.

Excerpt 3

HELPEE: It's not an easy thing to talk about. I guess the heart of the problem is sort of a sexual problem. I never thought I would have this sort of problem. But I find myself not getting the fulfillment I used to. It's not as enjoyable—for my husband either, although we don't discuss it. I used to enjoy and look forward to making love. I used to have an orgasm but I don't anymore. I can't remember the last time I was satisfied. I find myself being attracted to other men and wondering what it would be like to go to bed with them. I don't know what this means. Is this symptomatic of our whole relationship as a marriage? Is something wrong with me or us?

HELPER RESPONSES:

- _____ (1) Perhaps you feel your marriage and role of mother is holding you back and preventing you from being something else you want to be. Your resentment here against your husband is manifested in your frigidity. Perhaps it is your way of paying him back for keeping you down in this role, for confining you, for restricting you.
- _____ (2) What about your relationship with your husband, his role as father and companion?
- _____ (3) You don't quite know what to make of all this but you know something is dreadfully wrong and you are determined to find out for yourself, for your marriage.
- _____ (4) What's happened between you and your husband has raised a lot of questions about you, about him, about your marriage.

Excerpt 4

HELPEE: Gee, I'm so disappointed. I thought we could get along together and you could help me. We don't seem to be getting anywhere. You don't understand me. You don't know I'm here. I don't even think you care for me. You don't hear me when I talk. You seem to be somewhere else. Your responses are independent of anything I have to say. I don't know where to turn. I'm just so—doggone it—I don't know what I'm going to do, but I know you can't help me. There just is no hope.

HELPER RESPONSES:

- _____ (1) I have no reason to try and not to help you. I have every reason to want to help you.
- _____ (2) Only when we establish mutual understanding and trust and only then can we proceed to work on your problem effectively.
- _____ (3) It's disappointing and disillusioning to think you have made so little progress.
- _____ (4) I feel badly that you feel that way. I do want to help. I'm wondering. "Is it me? Is it you, both of us?" Can we work something out?

Excerpt 5

HELPEE: I get so frustrated and furious with my daughter. I just don't know what to do with her. She is bright and sensitive, but damn, she has some characteristics that make me so on edge. I can't handle it sometimes. She just—I feel myself getting more and more angry! She won't do what you tell her to. She tests limits like mad. I scream and yell and lose control and think there is something wrong with me—I'm not an understanding mother or something. Damn! What potential! What she could do with what she has. There are times she doesn't use what she's got. She gets by too cheaply. I just don't know what to do with her. Then she can be so nice and then, boy, she can be as onery as she can be. And then I scream and yell and I'm about ready to slam her across the room. I don't like to feel this way. I don't know what to do with it.

HELPER RESPONSES:

- _____ (1) So you find yourself screaming and yelling at your daughter more frequently during the past three months.
- _____ (2) Why don't you try giving your daughter some very precise limitations. Tell her what you expect from her and what you don't expect from her. No excuses.
- _____ (3) While she frustrates the hell out of you, what you are really asking is, "How can I help her? How can I help myself, particularly in relation to this kid?"
- _____ (4) While she makes you very angry, you really care what happens to her.

Excerpt 6

HELPEE: Sometimes I question my adequacy of raising three boys, especially the baby. I call him the baby—well, he is the last. I can't have any more. So I know I kept him a baby longer than the others. He won't let anyone else do things for him. If someone else opens the door, he says he wants Mommy to do it. If he closes the door, I have to open it. I encourage this. I do it. I don't know if this is right or wrong. He insists on sleeping with me every night and I allow it. And he says when he grows up he won't do it any more. Right now he is my baby and I don't discourage this much. I don't know if this comes out of my needs or if I'm making too much out of the situation or if this will handicap him when he goes to school—breaking away from Mamma. Is it going to be a traumatic experience for him? Is it something I'm creating for him? I do worry more about my children than I think most mothers do.

HELPER RESPONSES:

- _____ (1) So you find yourself raising a lot of questions as to if what you are doing is right for your child.
- _____ (2) Is it perhaps possible for you to have the child become involved in a situation such as some experiences in a public park where the child could play and perhaps at a distance you could supervise—where the child can gain some independence?
- _____ (3) Could you tell me—have you talked to your husband about this?
- _____ (4) While you are raising a lot of questions for yourself about yourself in relation to your youngest child, you are raising some more basic questions about yourself in relation to you. In lots of ways you're not certain where you are going—not sure who you are.

Excerpt 7

HELPEE: I finally found somebody I can really get along with. There is no pretentiousness about them at all. They are real and they understand me. I can be myself with them. I don't have to worry about what I say and that they might take me wrong, because I do sometimes say things that don't come out the way I want them to. I don't have to worry that they are going to criticize me. They are just marvelous people! I just can't wait to be with them! For once I actually enjoy going out and interacting. I didn't think I could ever find people like this again. I can really be myself. It's such a wonderful feeling not to have people criticizing you for everything you say that doesn't agree with them. They are warm and understanding, and I just love them! It's just marvelous!

HELPER RESPONSES:

- _____ (1) Sounds like you found someone who really matters to you.
- _____ (2) Why do these kind of people accept you?
- _____ (3) That's a real good feeling to have someone to trust and share with. "Finally, I can be myself."
- _____ (4) Now that you have found these people who enjoy you and whom you enjoy, spend your time with these people. Forget about the other types who make you anxious. Spend your time with the people who can understand and be warm with you.

Excerpt 8

HELPEE: Who do you think you are? You call yourself a therapist! Damn, here I am spilling my guts out and all you do is look at the clock. You don't hear what I say. Your responses are not attuned to what I'm saying. I never heard of such therapy. You are supposed to be helping me. You are so wrapped up in your world you don't hear a thing I'm saying. You don't give me the time. The minute the hour is up you push me out the door whether I have something important to say or not. I—uh—it makes me so goddamn mad!

HELPER RESPONSES:

- _____ (1) You are suggesting I'm wrapped up in myself. Do you think that perhaps, in fact, this is your problem?
- _____ (2) I'm only trying to listen to you. Really, I think we are making a whole lot of progress here.
- _____ (3) You are pretty displeased with what has been going on here.
- _____ (4) All right, you are furious, but I wonder if it's all mine or is there something else eating you.

Excerpt 9

HELPEE: I'm so thrilled to have found a counselor like you. I didn't know any existed. You seem to understand me so well. It's just great! I feel like I'm coming alive again. I have not felt like this in so long.

HELPER RESPONSES:

- _____ (1) Gratitude is a natural emotion.
- _____ (2) This is quite nice but remember, unless extreme caution is exercised, you may find yourself moving in the other direction.
- _____ (3) That's a good feeling.
- _____ (4) Hey, I'm as thrilled to hear you talk this way as you are! I'm pleased that I have been helpful. I do think we still have some work to do yet, though.

Excerpt 10

HELPEE: Gee, those people! Who do they think they are? I just can't stand interacting with them anymore. Just a bunch of phonies. They leave me so frustrated. They make me so anxious. I get angry at myself. I don't even want to be bothered with them anymore. I just wish I could be honest with them and tell them all to go to hell! But I guess I just can't do it.

HELPER RESPONSES:

- _____ (1) They really make you very angry. You wish you could handle them more effectively than you do.
- _____ (2) Damn, they make you furious! But it's just not them. It's with yourself, too, because you don't act on how you feel.
- _____ (3) Why do you feel these people are phony? What do they say to you?
- _____ (4) Maybe society itself is at fault here—making you feel inadequate, giving you this negative view of yourself, leading you to be unable to successfully interact with others.

Excerpt 11

HELPEE: No response. (*Moving about in chair.*)

HELPER RESPONSES:

- _____ (1) You can't really say all that you feel at this moment.
- _____ (2) A penny for your thoughts.
- _____ (3) Are you nervous? Maybe you haven't made the progress here we hoped for.
- _____ (4) You just don't know what to say at this moment.

Excerpt 12

HELPEE: I don't know if I am right or wrong feeling the way I do. But I find myself withdrawing from people. I don't seem to socialize and play their stupid little games any more. I get upset and come home depressed and have headaches. It all seems so superficial. There was a time when I used to get along with everybody. Everybody said, "Isn't she wonderful. She gets along with everybody. Everybody likes her." I used to think that was something to be really proud of, but that was who I was at that time. I had no depth. I was what the crowd wanted me to be—the particular group I was with.

HELPER RESPONSES:

- _____ (1) You know you have changed a lot. There are a lot of things you want to do but no longer can.
- _____ (2) You are damned sure who you can't be any longer but you are not sure who you are. Still hesitant as to who you are yet.
- _____ (3) Who are these people that make you so angry? Why don't you tell them where to get off! They can't control your existence. You have to be your own person.
- _____ (4) So you have a social problem involving interpersonal difficulties with others.

Excerpt 13

HELPEE: He is ridiculous! Everything has to be done when he wants to do it, the way he wants it done. It's as if nobody else exists. It's everything he wants to do. There is a range of things I have to do—not just be a housewife and take care of the kids. Oh no, I have to do his typing for him, errands for him. If I don't do it right away, I'm stupid—I'm not a good wife or something stupid like that. I have an identity of my own, and I'm not going to have it wrapped up in him. It makes me—it infuriates me! I want to punch him right in the mouth. What am I going to do? Who does he think he is anyway?

HELPER RESPONSES:

- _____ (1) It really angers you when you realize in how many ways he has taken advantage of you.
- _____ (2) Tell me, what is your concept of a good marriage?
- _____ (3) Your husband makes you feel inferior in your own eyes. You feel incompetent. In many ways you make him sound like a very cruel and destructive man.
- _____ (4) It makes you furious when you think of the one-sidedness of this relationship. He imposes upon you everywhere, particularly in your own struggle for your own identity. And you don't know where this relationship is going.

Excerpt 14

HELPEE: I'm so pleased with the kids. They are doing just marvelously. They have done so well at school and at home; they get along together. It's amazing. I never thought they would. They seem a little older. They play together better and they enjoy each other, and I enjoy them. Life has become so much easier. It's really a joy to raise three boys. I didn't think it would be. I'm just so pleased and hopeful for the future. For them and for us. It's just great! I can't believe it. It's marvelous!

HELPER RESPONSES:

- _____ (1) It's a good feeling to have your kids settled once again.
- _____ (2) Is it possible your kids were happy before but you never noticed it before? You mentioned your boys. How about your husband? Is he happy?
- _____ (3) Do you feel this is a permanent change?
- _____ (4) Hey, that's great! Whatever the problem, and you know there will be problems, it's great to have experienced the positive side of it.

Excerpt 15

HELPEE: They wave that degree up like it's a pot of gold at the end of the rainbow. I used to think that, too, until I tried it. I'm happy being a housewife. I don't care to get a degree. But the people I associate with, the first thing they ask is, "Where did you get your degree?" I answer, "I don't have a degree." Christ, they look at you like you are some sort of a freak, some backwoodsman your husband picked up along the way. They actually believe that people with degrees are better. In fact, I think they are worse. I've found a lot of people without degrees that are a hell of a lot smarter than these people. They think that just because they have degrees they are something special. These poor kids that think they have to go to college or they are ruined. It seems that we are trying to perpetrate a fraud on these kids. If no degree, they think they will end up digging ditches the rest of their lives. They are looked down upon. That makes me sick.

HELPER RESPONSES:

- _____ (1) You really resent having to meet the goals other people set for you.
- _____ (2) What do you mean by "it makes me sick?"
- _____ (3) Do you honestly feel a degree makes a person worse or better? And not having a degree makes you better? Do you realize society perpetrates many frauds and sets many prerequisites such as a degree. You must realize how doors are closed unless you have a degree, while the ditches are certainly open.
- _____ (4) A lot of these expectations make you furious. Yet, they do tap in on something in yourself you are not sure of—something about yourself in relation to these other people.

Excerpt 16

HELPEE: I'm really excited! We are going to California. I'm going to have a second lease on life. I found a marvelous job! Its great! It's so great I can't believe it's true—it's so great! I have a secretarial job. I can be a mother and can have a part-time job which I think I will enjoy very much. I can be home when the kids get home from school. It's too good to be true. It's so exciting. New horizons are unfolding. I just can't wait to get started. It's great!

HELPER RESPONSES:

- _____ (1) Don't you think you are biting off a little bit more than you can chew? Don't you think that working and taking care of the children will be a little bit too much? How does your husband feel about this?
- _____ (2) Hey, that's a mighty good feeling. You are on your way now. Even though there are some things you don't know along the way, it's just exciting to be gone.
- _____ (3) Let me caution you to be cautious in your judgment. Don't be too hasty. Try to get settled first.
- _____ (4) It's a good feeling to contemplate doing these things.

SEC

APPENDIX D
Table 1

SEC

APPENDIX D

APPENDIX

APPENDIX D-1

The Self-Disclosure Questionnaire

APPENDIX D-2

The SDQ Answer Sheet

APPENDIX D-1

THE SELF-DISCLOSURE QUESTIONNAIRE

People differ in the extent to which they let other people know them. We are seeking to investigate what people tell others about themselves.

Some of the things about yourself you will regard as more personal and private than others; people differ widely in what they consider appropriate to let others known, and what they consider is nobody's business but their own.

INSTRUCTIONS

On the following pages there is a list of topics that pertain to you. You have been given a special answer-sheet. What we want you to do is indicate on the answer-sheet the degree to which you have let each of several people in your life know this information about you. You are to read each item on the questionnaire, and then indicate on the answer-sheet the extent that you have talked about each item to that person; that is, the extent to which you have made yourself known to that person.

Using the rating-scale described below to indicate the extent that you have talked to each person about each item.

- 0: Have told the other person nothing about this aspect of me.
- 1: Have talked in general terms about this item. The other person has only a general idea about this aspect of me.
- 2: Have talked in full and complete detail about this item to the other person. He knows me fully in this respect, and could describe me accurately.
- X: Have lied or misrepresented myself to the other person so that he has a false picture of me.

1. What I think and feel about religion; my personal religious views.
2. My personal opinions and feelings about other religious groups than my own; e.g., Protestants, Catholics, Jews, atheists.
3. My views on communism.
4. My views on the present government--the prime minister, government, policies, etc.
5. My views on the question of racial integration in schools, transportation, etc.
6. My personal views on drinking.
7. My personal views on sexual morality--how I feel that I and others ought to behave in sexual matters.
8. My personal standards of beauty and attractiveness in women--what I consider to be attractive in a woman.
9. The things that I regard as desirable for a man to be--what I look for in a man.
10. My feeling about how parents ought to deal with children.
11. My favorite foods, the ways I like food prepared, and my food dislikes.
12. My favorite beverages and the ones I don't like.
13. My likes and dislikes in music.
14. My favorite reading matter.
15. The kinds of movies that I like to see best; the TV shows that are my favorites.
16. My tastes in clothing.
17. The style of house, and the kinds of furnishings that I like best.
18. The kind of party, or social gathering that I like best, and the kind that bore me, or that I wouldn't enjoy.
19. My favorite ways of spending spare time, e.g., hunting, reading, cards, sports events, parties, dancing, etc.
20. What I would appreciate most for a present.
21. What I find to be the worst pressures and strains in my

work.

22. What I find to be the most boring and unenjoyable aspects of my work.
23. What I enjoy most, and get the most satisfaction from in my present work.
24. What I feel are my shortcomings and handicaps that prevent me from working as I'd like to, or that prevents me from getting further ahead in my work.
25. What I feel are my special strong points and qualifications for my work.
26. How I feel that my work is appreciated by others (e.g., boss, fellow-workers, teacher, husband, etc.).
27. My ambitions and goals in my work.
28. My feelings about the salary or regards that I get for my work.
29. How I feel about the choice of career that I have made--whether or not I'm satisfied with it.
30. How I really feel about the people that I work for, or work with.
31. How much money I make at my work, or get as an allowance.
32. Whether or not I owe money; if so, how much.
33. Whom I owe money to at present; or who I have borrowed from in the past.
34. Whether or not I have savings, and the amount.
35. Whether or not others owe me money; the amount, and who owes it to me.
36. Whether or not I gamble; if so, the way I gamble, and the extent of it.
37. All of my present sources of income--wages, fees, allowances, dividends, etc.
38. My total financial work, including property, savings, bonds, insurance, etc.
39. My most pressing need for money right now, e.g., outstanding bills, some major purchase that is desired or needed.

40. How I budget my money--the proportion that goes to necessities, luxuries, etc.
41. The aspects of my personality that I dislike, worry about, that I regard as a handicap to me.
42. What feelings, if any, that I have trouble expressing or controlling.
43. The facts of my present sex life--including knowledge of how I get my sexual gratification; any problems that I might have; with whom I have relations, if anybody.
44. Whether or not I feel that I am attractive to the opposite sex; my problems, if any, about getting favorable attention from the opposite sex.
45. Things in the past or present that I feel ashamed and guilty about.
46. The kinds of things that make me just furious.
47. What it takes to get me feeling real depressed or blue.
48. What it takes to get me real worried, anxious and afraid.
49. What it takes to hurt my feelings deeply.
50. The kinds of things that make me especially proud of myself, elated, full of self-esteem or self-respect.
51. My feelings about the appearance of my face--things I don't like, and things that I might like about my face and head--nose, eyes, hair, teeth, etc.
52. How I wish I looked; my ideals for overall appearance.
53. My feelings about different parts of my body--legs, hips, waist, chest, or bust, etc.
54. Any problems and worries that I had with my appearance in the past.
55. Whether or not I now have any health problems, e.g., trouble with sleep, digestion, female complaints, heart condition, allergies, headaches, piles, etc.
56. Whether or not I have any long-range worries or concerns about my health, e.g., cancer, ulcers, heart trouble.
57. My past record of illness and treatment.
58. Whether or not I now make a special effort to keep fit, healthy and attractive, e.g., calisthenics, diet.

59. My present physical measurements, e.g., height, weight, waist, etc.
60. My feelings about my adequacy in sexual behavior--
whether or not I feel able to perform adequately in sex relationships.

APPENDIX D-2

ANSWER SHEET (SDQ)

NAME _____ DATE _____

SCALE:

0: Nothing; 1: General Terms, 2: Full and Complete, X: Misrepresented

	MALE FRIEND	FEMALE FRIEND	SPOUSE	CLIENT	COLL- EAGUE			MALE FRIEND	FEMALE FRIEND	SPOUSE	CLIENT	COLL- EAGUE	
1.							31.						
2.							32.						
3.							33.						
4.							34.						
5.							35.						
6.							36.						
7.							37.						
8.							38.						
9.							39.						
10.							40.						
11.							41.						
12.							42.						
13.							43.						
14.							44.						
15.							45.						
16.							46.						
17.							47.						
18.							48.						
19.							49.						
20.							50.						
21.							51.						
22.							52.						
23.							53.						
24.							54.						
25.							55.						
26.							56.						
27.							57.						
28.							58.						
29.							59.						
30.							60.						

OVERVIEW

APPENDIX E

Systematic Training Program in Helping and
Human Relations Skills

During the training, the trainee will be able to identify and resolve the conflicts or difficulties within a group member or conflicts and difficulties resulting from aspects of the trainee's own personal cycle behavior.

APPENDIX E

10-75-50851

PROGRAM OUTLINE FOR SYSTEMATIC TRAINING
PROGRAM IN HELPING AND HUMAN RELATIONS SKILLS

1. OVERVIEW

A. Training Leader's Functions:

1. Relationship - the trainer must establish a relationship with the group members typified by understanding, genuine concern and personal openness. To accomplish this the trainer must himself be functioning at adequate levels on the facilitative dimensions of empathy (E), warmth (PR), genuineness (G), and concreteness (C). The relationship, combined with the atmosphere of trust, mutual cooperation and effort it generates, are essential prerequisites for all interpersonal learning processes (Vitalo, 1970). Additionally, it provides the group members with an opportunity to witness and experience at first hand the skills they are attempting to acquire.
2. Model - the trainer provides through his actions a live model of facilitative functioning--thus opening an added channel for constructive learning.
3. Teacher - the trainer's didactic functions include: articulating the concepts being taught; clarifying their meaning; eliciting trainee practice-responding; guiding trainee responding through selective reinforcement and correction; offering alternative responses and implementing the training components described below. For these purposes the trainer must have an operational understanding of the dimensions being taught. While an intellectual grasp of the dimensions is valuable for training, only with a "doing level" comprehension of the dimensions will the training leader be able to properly reinforce, correct and shape behavior and offer alternative responses.
4. Caretaker - the trainer functions as a caretaker during training. He remains alert to potential obstacles to movement which may arise and he acts quickly to resolve them. These may include: friction between group members; conflicts or difficulties within a group member or conflicts and difficulties resulting from aspects of the trainer's own personality or behavior.

Summary:-

The training leader functions to:

1. establish a relationship conducive to interpersonal learning;

2. provide a live model for trainee imitation;
3. selectively reinforce and gradually shape trainee behavior;
4. generate alternate more appropriate responses;
5. implement training stages, and
6. maintain the flow of training.

To fulfill these functions the trainer must have an operational understanding of the dimensions being taught and be responsive to potential difficulties emanating from within himself or the group members.

B. Training Components:

1. Concept Presentation/Discussion - this component routine includes the presentation of the interpersonal dimensions to the group, the definition of the specific concept being considered, the demonstration of the concept by use of live or audio-taped examples, and the elicitation of discussion and comment by group members. The routine may also include the integration of readings where appropriate. This routine functions as a vehicle for introducing each phase of work, for stimulating group interest and involvement and for focusing attention on the specific material to be learned.

2. Structured Responding - this technique uses a basic formula for facilitative responding. Basic reply: you feel _____ (add feeling) because _____ (add reason). The trainee is instructed to use the basic formula in making his initial responses and to complete the reply by filling in the affect and content of the communication he is receiving. As the trainee progresses in accuracy and skill, he is permitted to vary from the formula and generate spontaneously his own personally unique responses. The structured responding technique offers three important advantages: 1. it gives the trainee a precise model for responding and consequently greatly speeds training; 2. it frees the trainee's attention to focus directly on the second person's communication and 3. it trains him to attend to both the feeling and content of the message he is receiving. The technique is for use with all trainee groups. The trainer must be cautioned, however, not to equate the basic reflective response given in the formula above with the concept of empathy. An accurate reflection delivered with appropriate feeling represents only one level of empathic functioning (approximately level 3). Higher levels of functioning derive from deeper, more intimate understanding of the second person's communication. Additionally, higher levels of functioning tend to be more active and spontaneous and less passive and reactive. Consequently,

these higher levels of empathic functioning cannot be formularized.

3. Single Response Phase - this routine follows the initiation of empathy training. The trainees are exposed to one sentence live or taped role played client statements. Each group member is called on, at random or in turn, to offer a one sentence reply. The trainer selectively reinforces and gradually shapes these responses to more accurate levels of functioning. Additionally, he offers alternative responses. This procedure is repeated until acceptable levels of accuracy are achieved. The single response phase is generally not employed during warmth, genuineness, and concreteness training since, by that point, the trainees are usually functioning at sufficiently high levels to integrate the new skills while freely responding in ongoing interactions.

4. Multiple Response Phase I - as the trainee develops proficiency in generating single responses, he is next exposed to a sequence of communications. This phase represents a transition from discrete responding to continuous interactions. The trainer's functioning remains the same during this phase as in the single response phase.

5. Multiple Response Phase II (Role Playing) - two significant developments occur during this training component: 1. the interactions become real and continuous and 2. each trainee serves as the helper/helpee for each other trainee. For the first time in training each group member uses his new skills in a live and thoroughly real interaction. Additionally, he is asked to explore himself and his own feelings in the group's presence and thus come into greater contact with himself and his own feelings as well as more fully appreciating the feelings other "helpees" are likely to experience. During this training phase the group becomes in its fullest sense a vehicle for facilitating each member's personal growth and development.

The group leader initiates this training component when, in his judgement, trainees have progressed adequately in skills acquisition. The trainer continues in his didactic functioning--however, most critical at this point is his ability to create and nurture an atmosphere of frankness, sincerity and mutual concern.

While group members usually respond hesitantly to the initiation of this training component, most frequently this hesitancy disappears after each person's first experience as helper/helpee. Occasionally trainees will continue to resist functioning in the helpee role. While the trainer may opt to temporarily allow the

trainee to explore an imaginary problem, full training benefits only accrue when the trainee can be brought to share his own personal experiences.

6. Affect-Expression Training - this component functions to remedy lack of trainee emotional expressiveness in either voice or gesture. Such inhibition restricts communication of the facilitative dimensions. During the training routine, the trainer focuses his efforts on developing the trainee's voice characteristics of volume, inflection and pitch. Additionally, the non-voice characteristics of gesture, facial expression and posture are dealt with. In each instance, one of the five basic feelings (anger, joy, love, fear and sadness) is selected and demonstrated emphasizing all channels of communication (words, volume, tone, inflection, gesture, posture, facial configuration). Trainees are directed in turn to imitate and practice this "full channel" communication. The trainer observes and evaluates this performance and selects out the trainee's "weak channel" for further emphasis and practice. The practice sessions are aided by the trainer evoking appropriate feelings through suggestion and imagery. In addition, the trainer coaxes each trainee to recall a real life experience which typifies the feeling being practiced. At the beginning of a practice session, the trainer may elect to "loosen-up" the group through callisthenics, hand clapping, shouting, group singing or some other innovative method. Affect-expression training may be introduced with training in positive regard and genuineness.

Trainee objections that such practice is "phoney" are countered by the challenge to make the feelings real. It is further noted that each individual should have the capacity for full expression of feelings available to him and that the process of acquiring this facility is a valid one.

7. Permanence Training - this routine aims at helping each trainee maintain and enhance his newly acquired skills after the conclusion of training. In the group context:

- a) facilitative functioning is immediately and consistently reinforced;
- b) meaningful interactions tend to unfold with ease,
and
- c) one's functioning is reciprocated by the functioning of the other group members.

None of these conditions is likely to persist outside the training group. Indeed, there is research to

suggest that society in general cannot offer nurturance to its members (Carkhuff and Berenson, 1967), that social units sometimes react destructively to the improved functioning of one of its members (Boszormenyi-Nagy and Framo, 1965) and that a vast majority of social interactions are circular and fruitless "games" with players who resist real and intimate contacts (Berne, 1964). Permanence training involves the raising of these possibilities. It entails:

- a) pointing out the subtle supportive effects of the group on each member's functioning;
- b) suggesting what effect the non-continuation of this support may have, and
- c) developing individual ways for coping with this loss and for maintaining each member's functioning.

SYSTEMATIC TRAINING PROGRAM IN HELPING AND HUMAN RELATIONS SKILLS

The purpose of the training program is to train helpers who can effectively relate to persons in need of help and facilitate their positive movement. Carkhuff (1968, 1969a, 1969b) has discussed the essential aspects of such a training program. Hence, the present manual attempts to outline in detail a program to be followed by a trainer who has as his goal the training of groups of individuals to function constructively in helping relationships with others. The manual may be used by any high-functioning person to train counselors, therapists, teachers, social workers, nurses, parents, caseworkers and others involved in interpersonal (helping) relationships.

The basic orientation of the training is to develop a systematic series of step-by-step reinforcement experiences. It is a behavioristic approach to experiential dimensions. This particular approach has been chosen because it has been shown to produce the desired outcomes (Carkhuff, 1969). It seems that the more systematic one is in the development of the stages towards the chosen goals, the more effective one can be in achieving them.

Hence, the training program is developed around 3 central elements which integrate the critical sources of learning:

1. A group content in which the trainer communicates minimally facilitative levels of accurate empathy, respect

or positive regard, facilitative genuineness and personally relevant concreteness to the trainees. This means that the trainer not only offers high levels of facilitative and action-oriented dimensions (thus providing the trainee with the same experiential base as the helpee is to be offered) but also establishes himself as a model for a person who can sensitively share experiences with another as well as act upon these experiences, both within and without the pertinent interpersonal process. This modelling or imitative process will serve to increase the trainee's own behavioral response repertoire.

2. A highly specific didactic teaching and "shaping" process in which the trainer focuses upon the facilitative dimensions which he is employing in interaction with the trainees. He uses the Carkhuff scales for "shaping" the trainees' responses toward high levels of empathy, respect, genuineness, and concreteness.

3. Through experiential learning by the actual practice of new behavior the trainee's experiential base of both understanding and action will free him to further experience and experiment with himself. In order for trainees to function effectively in the helping role they must be given plenty of practice in the helping role. Hence, in order for the trainees to learn to communicate effectively they must be given practice in communication (Carkhuff, 1969). Thus, the three critical sources of learning employed in the training program are modelling, direct

teaching, and experiential learning.

The training program as defined in the manual is divided into two sections. The first section consists of 4 units concentrating on the specific communication skills of: Paraphrase, Behavior Description, Description of Feeling, and Perception Check; the second section consists of 4 units concentrating on instruction and practice in the communication of the dimension of Accurate Empathy, Facilitative Genuineness, and Concreteness. The bulk of training time is spent on the second section while the first section provides an introduction to communication skills and an orientation to the second part of the training program.

The manual follows the same general outline throughout. Each unit contains the following materials:

1. An outline of the step-by-step procedures to be followed by the trainer for that unit, including the hand-outs and materials needed for the unit.

2. A detailed description of the program to be followed by the trainer including the time allotted for each activity, the instructions, material, rationale, and objectives for each activity.

3. A copy of all materials and instructions required by the trainees.

4. A statement of the objectives of each unit.

5. A theoretical explanation of the dimensions the trainer is teaching.

UNIT 1: OVERVIEW OF COMMUNICATION UNITS

Trainer Information

Objective: To introduce and describe to group participants the 4 units included in Interpersonal Communication Instruction

Step	Time	Schedule	Handouts	Materials
1.	5 minutes;	Introductions		
2.	3 minutes;	Objectives and method of program		
3.	2 minutes;	Questions		
4.	3 minutes;	Read Handout 1	Handout 1	
5.	5 minutes;	Read Handout 2	Handout 2	
6.	2 minutes;	Questions		
Total time-20 minutes.				

UNIT 1: OVERVIEW OF COMMUNICATION UNITS

Trainer Information

Step	Time	Instructions	Material	Rationale	Objective
1.	5 minutes	Ask participants to introduce themselves to the group by giving their name and telling something about themselves. Trainer introduces himself first.		Relieves anxiety associated with entering a new group by engaging in a focussed activity.	Provides opportunity to become acquainted.
2.	3 minutes	Introduce the objectives of the training program to the group members. Explain the method to be used to reach the objectives.		Orients group members to the activities they will be engaging in.	To acquaint the group with the objectives and method of the program.
3.	2 minutes	Question period.		To prevent confusion and misunderstanding.	To clarify any misunderstandings.
4.	3 minutes	Introduce first 4 units of program. Distribute Handout 1 and ask participants to read it.	Handout 1		
5.	5 minutes	Introduce 4 basic communication skills. Distribute Handout 2. Ask participants to	Handout 2	Provides a global view of communication skills.	To provide an overview of communication skills.
6.	2 minutes	Question Period.			
Total Time - 20 minutes.					

UNIT 1: OVERVIEW OF COMMUNICATION UNITS

This is an overview of the 4 units included in interpersonal communication instruction. The 4 units dealing with basic communication skills attempt to bring these skills more clearly into awareness so that you, as an individual, can work at improving your skills in communicating. Improving skills of communication goes beyond simply becoming more clear about what you know. Therefore each unit provides opportunities to practice the behaviors which are described, learn ways to recognize these behaviors, and gain "feedback" from your partners about the ways you use these behaviors.

Another important aspect of interpersonal communications involves the personal style of the individual. For example, the skill of paraphrasing involves repeating what you have heard someone say, and checking with him to be sure you understand what he meant by it. The exact behavior you use to do this checking will depend on your personal style. Another example would be that individuals show trust differently dependent upon their personal style. The important questions are whether you are clear about the ways you show trust in your communications and whether you know ways to help others recognize when you are attempting to show trust in your personal style of communicating.

In review, the exercises in units 2 to 4 attempt to

provide three kinds of opportunity:

1. to become more clear about things you know about interpersonal communications;
2. to practice what you do in interpersonal communications;
3. to recognize more clearly your personal style of interpersonal communications.

Handout 2 provides a brief summary of the basic communication skills to be learned in Units 2 through 4. Wallen (1971) has summarized the skills into two categories:

1. Reception skills of paraphrase and perception check which are learned in unit 2, and
2. Transmission skills of behavior description and description of feelings which are learned in units 3 and 4.

SUMMARY OF BASIC COMMUNICATION SKILLS
FOR IMPROVING INTERPERSONAL RELATIONSHIPS

John L. Wallen
1968 r 1971

Objectives: You bridge the interpersonal gap as you increase the understanding you and another share. A shared understanding means that each of you has accurate information about the other's (a) ideas and suggestions, and (b) feelings - his intentions, emotional responses, assumptions.

The four communication skills summarized here can be helpful
...

- ... if you want to encourage a spirit of joint inquiry ("Let us try to understand how each of us views this") rather than competing, blaming and fault-finding ("You're wrong: I'm right").
- ... if you want to increase the amount of information held in common.
- ... if you want to reduce the depreciation and hostility transmitted.
- ... if you want to lessen the likelihood of injury and hurt feelings.

1. Reception Skills: (acknowledging by checking) These responses (a) let the speaker know you have heard him (acknowledging) and (b) that you wish to compare your understanding against his for accuracy (checking).

A. Paraphrase: (Concern with ideas and suggestions)
Letting the other know what meaning his statements evoke in you.

"Do you mean ... (statement) ...?"
"Is this ... (statement) ... an accurate understanding of your idea?"
"Would this be an example of what you mean?
Giving a specific example)"

B. Perception Check: (Concern with the person, his feelings) Describing what you perceive the other feels -- tentatively and without evaluating him.

"I get the impression you'd rather not talk about this. Is that so?"
"You were disappointed that they did not ask you?"
"You look like you felt hurt by my comment. Did you?"

2. Transmission Skills: These responses aim at transmitting information free of attack, accusation, depreciation, and other relation-straining attributes.

A. Behavior Description: Describing specific, observable actions of others rather than stating inferences, accusations, or generalizations about their motives, attitudes or personality traits.

"You bumped my cup," rather than "You never watch where you're going."

"Jim and Bill have done most of the talking and the rest of us have said very little," rather than "Jim and Bill just have to hog the spotlight."

B. Description of Feelings: Identifying your feelings by (1) name, (2) simile, (3) action urge and conveying it as information about your inner state and not as an accusation or coercive demand against the other.

"I felt hurt when you ignored my comment," rather than "You're rude!"

"I feel hurt and embarrassed," rather than "You just put me down!"

"I'm disappointed that you forgot," rather than "You don't care about me!"

"I'm too angry to listen to any more now," rather than "Get the Hell out!"

UNIT 2: PARAPHRASING

Leader Information

Objective: To develop the ability to convey to another person what his idea or suggestion means to the individual listening. To identify paraphrasing as a communication skill that can be used to help a person understand what others are saying.

Step	Time	Schedule	Handouts	Materials
1.	2 minutes;	Brief schedule of steps		
2.	3 minutes;	Demonstration of paraphrasing		
3.	5 minutes;	Read Handout 1	Handout 1	
4.	17 minutes;	Form trios and discuss topic using ground rule		
5.	5 minutes;	Read Handout 2	Handout 2	
6.	17 minutes;	In trios share first impressions with each other and receive feedback on paraphrasing from observer		
7.	12 minutes;	Divide large group into two small groups and discuss topic observing the ground rule of paraphrasing		
8.	2 minutes;	Discuss Handout 3 in total group	Handout 3	

Total time - 63 minutes.

UNIT 2: PARAPHRASING

Leader Information

Step	Time	Instructions	Material	Rationale	Objective
1.	2 minutes	Present on newsprint brief schedule of steps			
2.	3 minutes	Introduce paraphrasing by demonstrating the skill with one or two participants. In the demonstrations, with one participant demonstrate paraphrasing and with another demonstrate both word-swapping and paraphrasing		Presents the skill and the difference between paraphrasing and word-swapping	To identify differences between paraphrasing and word-swapping
3.	5 minutes	Distribute Handout 1, Paraphrasing. Ask participants to read it	Handout 1, Paraphrasing		
4.	2 minutes	Ask participants to think about and prepare to discuss in groups of 3: "Problems I have communicating with others."		Provides criteria for using the skill of paraphrasing	To provide a guideline for using paraphrasing

Step	Time	Instructions	Material	Rationale	Objective
5.		Explain that the ticket of admission to the discussion will be paraphrasing. After discussion begins, before anyone speaks, he must paraphrase what the last person said. The first speaker must accept the version of the paraphrase before the second person continues			
6.	15 minutes	Trios discuss topic using ground rule of paraphrasing. Trainer listens in.		Provides a common topic so everyone can participate	To try out paraphrasing
7.	5 minutes	Distribute Handout 2 Allow time for individual reading in trios	Handout 2 Handling Misunderstanding	Reinforces how emotional factors and the possibility of being influenced are the greatest barriers to the use of paraphrasing	To provide information about how paraphrasing can be used to deal with misunderstandings
8.	2 minutes	Ask participant to think about and be prepared to share with the other members of their trios their first impressions. This will be done in pairs with the third member giving feedback on paraphrasing.			

Step	Time	Instructions	Material	Rationale	Objective
		Instruct participants to observe the same ground rule: the person who is receiving another trio member's first impressions must paraphrase the message he receives. Hence, every member will give his impressions of the other members and receive their impressions of him while a third person observes and comments on the paraphrasing			
9.	15 minutes	Trios give first impressions using ground rule of paraphrasing and receive feedback on paraphrasing. Trainer listens in.		(1) Demonstrates experientially how emotional factors can be barriers in paraphrasing (2) Concept of feedback is introduced	Further practice with paraphrasing in which feedback on the skill is provided
10.	2 minutes	Ask large group to divide into two smaller groups with different people than were in the trios. Discuss the topic: "How the skill of paraphrasing might be used in my work setting--when, where, by whom--to what end?" Instruct participants to observe the same ground			

Step	Time	Instructions	Material	Rationale	Objective
11.	10 minutes	<p>rule: the ticket of admission to the discussion is paraphrasing.</p> <p>Small groups discuss topic using ground rule of paraphrasing. After 5 minutes interrupt and repeat ground rule.</p>		<p>To provide larger cross-fertilization of ideas. The groups are more likely to implement the skill</p>	<p>Participants identify the uses of paraphrasing appropriate to their work setting</p>
12.	2 minutes	<p>Restructure total group. Explain that in addition to paraphrasing what another person says when not sure of what he says, it is also appropriate and helpful to ask another person to paraphrase if not sure that he is understanding what one is saying. Encourage participants to continue using this skill within and outside the group to gain practice.</p>	Handout 3	<p>Reinforces the use of paraphrasing and points out to a greater variety of applications</p>	<p>To present a summary and reinforce appropriate use of paraphrasing</p>

Total Time - 63 minutes.

Paraphrase

A Basic Communication Skill For Improving Interpersonal Relationships

The problem: Tell somebody your phone number and he will usually repeat it to make sure he heard it correctly. However if you make a complicated statement most people will express agreement or disagreement without trying to insure that they are responding to what you intended. Most people seem to assume that what they understand from a statement is what the other intended.

How do you check to make sure that you understand another person's ideas, information, or suggestions as he intended them? How do you know that his remark means the same to you as it does to him?

Of course, you can get the other person to clarify his remark by asking, "What do you mean?" or "Tell me more." or by saying "I don't understand." However, after he has elaborated you still face the same question. "Am I understanding his idea as he intended it to be understood?" Your feeling of certainty is no evidence that you do, in fact, understand. (See "On Misunderstanding.")

The skill: If you state in your own way what his remark conveys to you, the other can begin to determine whether his message is coming through as he intended. Then, if he thinks you misunderstand, he can speak directly to the specific misunderstanding you have revealed. I will use the term "paraphrase" for any means of showing the other person what his idea or suggestion means to you.

Paraphrasing, then, is any way of revealing your understanding of the other person's comment in order to test your understanding.

An additional benefit of paraphrasing is that it lets the other know that you are interested in him. It is evidence that you do want to understand what he means.

If you can satisfy the other that you really do understand his point, he will probably be more willing to attempt to understand your views.

Paraphrasing, thus, is crucial in attempting to bridge the interpersonal gap. (1) It increases the accuracy of communication, and thus the degree of mutual or shared understanding. (2) The act of paraphrasing itself conveys

feeling -- your interest in the other, your concern to see how he views things.

Learning to paraphrase: People sometimes think of paraphrasing as merely putting the other person's ideas in another way. They try to say the same thing with different words. Such word-swapping may merely result in the illusion of mutual understanding as in the following example.

Sarah: Jim should never have become a teacher.
Fred: You mean teaching isn't the right job for him?
Sarah: Exactly! Teaching is not the right job for Jim.

Instead of trying to reword Sarah's statement, Fred might have asked himself, "What does Sarah's statement mean to me? In that case the interchange might have sounded like this.

Sarah: Jim should never have become a teacher.
Fred: You mean he is too harsh on the children? Maybe even cruel?
Sarah: Oh, no. I meant that he has such expensive tastes that he can't ever earn enough as a teacher.
Fred: Oh, I see. You think he should have gone into a field that would have insured him a higher standard of living.
Sarah: Exactly! Teaching is not the right job for Jim.

Effective paraphrasing is not a trick or a verbal gimmick. It comes from an attitude, a desire to know what the other means. And to satisfy this desire you reveal the meaning his comment has for you so that the other can check whether it matches the meaning he intended to convey.

If the other's statement was general, it may convey something specific to you.

Larry: I think this is a very poor textbook.
You: Poor? You mean it has too many inaccuracies?
Larry: No, the text is accurate, but the book comes apart too easily.

Possibly the other's comment suggests an example to you.

Laura: This text has too many omissions; we shouldn't adopt it.
You: Do you mean, for example, that it contains nothing about the Negro's role in the development of America?
Laura: Yes, that's one example. It also lacks any discussion of the development of the arts in America.

If the speaker's comment was very specific, it may convey a more general idea to you.

Ralph: Do you have 25 pencils I can borrow for my class?

You: Do you just want something for them to write with? I have about 15 ball-point pens and 10 or 11 pencils.

Ralph: Great. Anything that will write will do.

Sometimes the other's idea will suggest its inverse or opposite to you.

Stanley: I think the Teachers' Union acts so irresponsibly because the Administration has ignored them so long.

You: Do you mean that the T.U. would be less militant now if the Administration had consulted with them in the past?

Stanley: Certainly. I think the T.U. is being forced to more and more desperate measures.

To develop your skill in understanding others, try different ways of (1) conveying your interest in understanding what they mean, (2) revealing what the other's statements mean to you. Find out what kinds of responses are helpful ways of paraphrasing for you.

The next time someone is angry with you or is criticizing you, try to paraphrase until you can demonstrate that you understand what he is trying to convey as he intends it. What effect does this have on your feelings and on his?

John L. Wallen
Northwest Regional Educational Laboratory
1968

HANDLING MISUNDERSTANDINGS¹

Dealing with Breakdowns in Communication

Real communication is very hard to achieve. We tend to judge, to evaluate, to approve or disapprove before we really understand what the other person is saying--before we understand the frame of reference from which he is talking. This tendency of most humans to react first by forming an evaluation of what has just been said, to evaluate it from our own point of view, is a major barrier to mutual interpersonal communication.

Progress toward understanding can be made when this evaluative tendency is avoided--when we listen with understanding--when we are actively listening to what is being said. What does this mean? It means to see the expressed idea and attitudes from the other person's point of view, to sense how it feels to him, to achieve his frame of reference in regard to the thing he is talking about.

This sounds simple, but it is not.

To test the quality of your understanding, try the following. If you see two people talking past each other, if you find yourself in an argument with your friend, with

¹The approach proposed here for dealing with misunderstandings was first stated by Carl Rogers in 1951. This abstract, elaboration and extension of his ideas to handling conflict was prepared by Floyd Mann, Center for Research on Utilization of Scientific Knowledge, University of Michigan. For more information, see (Carl Rogers. *On Becoming a Person*. Boston: Houghton Mifflin, 1961, Chapter 17.)

your wife or within a small group, stop the discussion for a moment, and for an experiment, institute this rule of Carl Rogers. "Each person can speak up for himself only after he has first restated the ideas and feelings of the previous speaker accurately--and to that speaker's satisfaction."

This would mean that before presenting your own point of view, it would be necessary for you to really achieve the other speaker's frame of reference--to understand his thoughts and feelings so well that you could summarize them for him. This is a very effective process for improving communications and relationships with others. It is much more difficult to do behaviorally than you would suspect.

What will happen if you try to do this during an argument?

You will find that your own next comments will have to be drastically revised. You will find the emotion going out of the discussion, the differences being reduced. There is a decrease in defensiveness, in exaggerated statements, in evaluative and critical behavior. Attitudes become more positive and problem solving. The differences which remain are of a rational and understandable sort. Or they are real differences in basic values.

What are the risks? The obstacles? What are the difficulties that keep this bit of knowledge from being utilized?

Try this and you risk being influenced by the other

person. You might see it his way--have to change your position. There is the risk of change. In this sense, listening can be dangerous--and courage is required.

There is a second obstacle. It is just when emotions are strongest that it is most difficult to achieve the frame of reference of the other person or group. A third party, who is able to lay aside his own feelings and evaluations, can assist greatly by listening with understanding to each person or group and clarifying the views and attitudes each holds. A third party catalyst may, incidentally, have great difficulty in intervening and proposing the use of this approach. Any intervention into a heated discussion can be interpreted by one party or the other as someone taking the other person's side. This is especially true if the third party asks you to try and state the other person's ideas and feelings when you have not really been listening, but thinking what you should say next when he pauses to take a breath.

Another difficulty stems from our notions as to what is proper to ask a person to do in a discussion. It seems quite within good taste to ask a person to restate how he sees the situation. But to ask him to restate the other man's position is not consistent with our common sense ways of handling differences. The one who would change the pattern--try to break out of the vicious circle of increasingly greater misunderstanding--must have enough confidence in himself to be able to propose something different. He will have to have an appreciation of how to go from dealing with misunderstandings to handling conflict and using

differences--of how differences can be used to find more elegant solutions to problems. Equally useful will be an awareness that thesis - antithesis - synthesis is a potential outcome from a development discussion of differences.

Discussions in which one person loses and the other wins seldom solve anything permanently. When a person senses a win-lose situation developing, it should be interpreted as a clue to the need for a new approach, a search for alternate solutions, to be sure that there is not another answer to the problem.

The greatest difficulty of all, of course, is to learn to use the rule when you yourself are in an increasingly heated verbal exchange. Not to be dependent on a third person to intervene when you create or are a party to a growing misunderstanding is real evidence of understanding the approach proposed here. The full value of this rule is available to us only when each of us can note that we are getting increasingly irritated, angry, and unable to communicate effectively...when we can use these signals to identify the situation in which we are personally involved and even trapped where the rule might be employed...if we could retrieve the rule from our memory, and if we could use it behaviorally in an effective manner.

WHEN TO USE A SKILL LIKE PARAPHRASING

Paraphrasing is a communication skill designed to help you understand others. This is one of our communication skills you will be introduced to during this series. The other three skills are behavior description, description of feeling and perception checking. The four skills are not new or unique and almost everyone uses the skills at different times. These skills can be learned, practiced, and then used in whatever situations you need them to help you understand the communication between you and others.

Of course, communication skills can be overdone and used when it's not necessary. They are best used when you want to make sure that you and someone else clearly understand what is being said.

UNIT 3: BEHAVIOR DESCRIPTION

Leader Information

Objective: To develop the skill of communicating to another person the behavior he exhibits which has an effect on you.

To distinguish between a behavior description reporting specific, observable actions and an inference or evaluative statement about the other person's behavior, motives, feelings, attitudes or personality traits.

Step	Time	Schedule	Handouts	Materials
1.	2 minutes;	Brief schedule of steps		
2.	12 minutes	Form fish-bowl; two small groups. Group B pair with members of Group A and observe while Group A discusses topic. Group B writes down behavior descriptions of partners.		Paper and pencils
3.	5 minutes	Pairs meet and observers share observations		
4.	5 minutes	Read Handout 1 and critique own descriptions	Handout 1	
5.	10 minutes	Group B take inner circle and discuss topic. Write down behavior descriptions		Paper and pencils
6.	3 minutes	Pairs meet and observer shares behavior description		

Step	Time	Schedule	Handouts	Materials
7.	15 minutes	Group of 4 form and critique their behavior descriptions using Handout 1		
8.	2 minutes	Brief review of behavior description.	Handout 1	
9.	12 minutes	Participants join their small groups and describe briefly the behavior of the other group members as observed in previous discussion. Apply criteria in Handout 1		
10.	2 minutes	Distribute Handout 2, Defensive Communication and ask participants to read it on their own time.	Handout 2	

Total Time - 68 minutes.

Step	Time	Instructions	Material	Rationale	Objective
5.	5 minutes	Distribute Handout 1; Behavior Descriptions. Ask participants to read and to check their descriptions using the criteria in the handout.	Handout 1 Behavior Description	Participants can compare their own behavior descriptions with criteria for behavior in Handout 1.	person on his behavior. To provide cognitive information on what comprises behavior description.
6.	10 minutes	Ask Group B to take the inner circle and discuss the topic: "How I could become a better helper to those with whom I am involved?" Group A is to observe Group B, and write down the behaviors they observe in their partners.	Paper and pencils		Gives all group members the opportunity to observe and describe behavior, opportunity to discuss their role as a helper.
7.	3 minutes	Interrupt after 10 minutes and ask pairs to meet. Observer share his observations with his partner.			
8.	15 minutes	Ask pairs to join with another pair to form a group of 4. In this group they will share their behavior descriptions and critique the results using the criteria in Handout 1.		Opportunity to realize that practice in behavior description is needed. Shows participants the difficulties in	To compare results with others, applying criteria. Opportunity to review criteria for the communication skill

UNIT 3: BEHAVIOR DESCRIPTION

Leader Information

Step	Time	Instructions	Materials	Rationale	Objective
1.	2 minutes	Present on newsprint brief schedule of steps.			
2.	2 minutes	<p>Ask large group to divide into their two small groups, with one group observing the other group.</p> <p>Members of Group A are paired with members of Group B for observation. The observer will sit opposite the group member he is observing but outside the group.</p> <p>The observer is to write observations he makes down on paper and be prepared to describe the other person's behavior later.</p> <p>The topic of discussion for Group A is: "What are the important qualities for a person in a helping profession to have?"</p>	Paper and pencils	<p>Forces the observer to describe behavior before having information on how to do it. Later they can see how much they need to learn.</p>	<p>An opportunity to observe behavior and attempt to begin describing it.</p> <p>Opportunity to share and explore ideas about what a helper is.</p>
3.	10 minutes	Group A discuss topic while being observed by Group B.			
4.	5 minutes	<p>After 10 minutes interrupt and ask pairs to meet and observer share the observations of his partner's behavior he has written down.</p>		<p>Allows group members opportunity to describe another person's behavior to that person directly.</p>	<p>Introduces idea of describing another person's behavior to him.</p> <p>Introduces idea of giving feedback to another</p>

Step	Time	Instructions	Material	Rationale	Objective
		Ask members to identify difficulties in behavior description.		describing behavior and provides self-generated criteria for increasing skill of critiquing accuracy of behavior description.	of behavior description.
9.	2 minutes	<p>Interrupt and ask participants to look at Handout 1; Behavior Description.</p> <p>Review aloud for them that behavior description means describing observable actions, without placing a value on them as right or wrong, bad or good.</p> <p>Descriptions do not include inferences, accusations, or generalizations about the other person's motives, attitudes or personality traits.</p>	Handout 1	<p>Provides idea that there is real here-and-now material for behavior identification and description.</p>	Introduces idea of applying criteria within the group.
10.	2 minutes	<p>Ask participants to join their original small group. Ask group members to think about the behavior of their small group members during the previous discussion.</p> <p>Announce that during the next small group meeting each person is to describe briefly the behavior of the other group members as seen in the previous discussion.</p>		<p>Provides opportunity for try out of skill of behavior description and receive reactions as to the correct application of criteria.</p>	To practice describing in a "real" setting

Step	Time	Instructions	Material	Rationale	Objective
11.	10 minutes	Ask small group members to share their behavior descriptions. Encourage participants to apply criteria for behavior description.			
12.	2 minutes	Distribute Handout 2; Defensive Communication Explain that they can read it on their own outside the group session and will find it helpful.	Handout 2	Facilitates understanding of communication skills.	To provide additional cognitive information.

Total Time - 68 minutes.

Behavior Description

A Basic Communication Skill for Improving Interpersonal Relationships

The problem: If you and another person are to improve the way you get along together, you must be able to convey what each does that affects the other. This is not easy. Most of us do not describe behavior clearly enough for others to know what actions we have in mind. Instead, we usually state what we infer about his motivations, attitudes and personality traits; often we are not even aware we are inferring rather than describing. Because we are so used to inferring we may not ever know what the other did that led us to our inferences.

The skill of behavior description, then, depends upon accurate observation which, in turn, depends upon being aware of when you are describing and of when you are inferring.

The skill: A statement must pass two tests to be a behavior description.

1. A behavior description reports specific, observable actions rather than inferences or generalization about the person's motives, feelings, attitudes or personality traits. It states what was observed. It does not infer about why.

<u>Behavior Descriptions</u>	<u>Inferences</u>
Fran walked out of the meeting 30 minutes before it was finished.	Fran was annoyed. Fran had an appointment elsewhere.
Bob's eyes filled with tears.	Bob had a cold. Bob felt sorry for himself.
Becky did not say anything when Bill asked her a question.	Becky did not hear Bill. Becky resented Bill's question. Becky was embarrassed.

2. A behavior description is non-evaluative: It does not say or imply what happened was good or bad, right or wrong. Evaluative statements (such as name-calling, accusations, judgements) usually express what the speaker is feeling and convey little about what behavior is observed.

Behavior Descriptions

Jim talked more than others on this topic. Several times he cut others off before they finished.

"Bob, you've taken the opposite of most statements Harry has made today."

Fran walked out of the meeting 30 minutes before it was finished.

"Sam, you cut in before I finished."

Evaluative Statements

Jim is rude.
Jim wants to hog the center of attention.

"Bob, you're just trying to show Harry up."
Bob, you're being stubborn."

Fran is irresponsible.
Fran doesn't care about others.

"Sam, you deliberately didn't let me finish."

The word "deliberately" implies that Sam knowingly and intentionally cut you off. All anybody can observe is that he did cut in before you had finished.

As an example of the difference a behavior description may make, let's suppose you tell me I am rude (a generalized trait) or that I don't care about your feelings (an inference about my motivation). Because I am not trying to be rude and because I feel I do care about your feelings, I don't know what the basis is for your negative evaluation of me. We certainly have not moved closer to a shared understanding. However, if you point out that several times in the past few minutes I have interrupted you and have overridden you before you could finish what you were saying, I get a clearer picture of what actions of mine were affecting you.

Several members of his group have told Ben that he was too arrogant. Ben was confused and puzzled by this judgement. He was confused because he didn't know what to do about it; he didn't know what it referred to. He was puzzled because he didn't feel arrogant or scornful of the others. In fact, he admitted he really felt nervous and unsure of himself. Finally, Joe said that Ben often laughed explosively after Ben made a comment that seemed to have no humorous aspects. Others immediately agreed this was the behavior that led them to perceive Ben as looking down on them and, therefore, arrogant. Ben said he had not been aware of this.

The pattern, thus, was as follows. When he made a statement of which he was somewhat unsure, Ben felt insecure. ...Ben's feelings of insecurity expressed themselves in an explosive laugh after he made the statement. ...the other person perceived Ben as laughing at him. ...the other person felt put down and humiliated. ...the

other's feeling of humiliation was expressed in the accusation that Ben was arrogant. Note that Ben had no awareness of his own behavior (the laugh) which was being misread until Joe accurately described what Ben was doing. Ben could then see that this laugh was a way of attempting to cope with his own feelings of insecurity.

To develop skill in describing behavior you must sharpen your observation of what actually did occur. You must force yourself to pay attention to what is observable and to hold inferences in abeyance. As you practice this you may find that many of your conclusions about others are based less on observable evidence than on your own feelings of affection, insecurity, irritation, jealousy, or fear. For example, accusations that attribute undesirable motives to another are usually expressions of the speaker's negative feelings toward the other.

John L. Wallen
Rev. 1/1970

One way to understand communication is to view it as a people process rather than as a language process. If one is to make fundamental improvements in communication, he must make changes in interpersonal relationships. One possible type of alteration--and the one with which this paper is concerned--is that of reducing the degree of defensiveness.

Defensive behavior is defined as that behavior which occurs when an individual perceives threat or anticipates threat in the group. The person who behaves defensively, even though he also gives some attention to the common task, devotes an appreciable portion of his energy to defending himself. Besides talking about the topic, he thinks about how he appears to others, how he may be seen more favorably, how he may win, dominate, impress, or escape punishment, and/or how he may avoid or mitigate a perceived or an anticipated attack.

Such inner feelings and outward acts tend to create similarly defensive postures in others; and, if unchecked, the ensuing circular response becomes increasingly destructive. Defensive behavior, in short, engenders defensive listening, and this in turn produces postural, facial, and verbal cues which raise the defense level of the original communicator.

¹Jack R. Gibb. "Defensive Communication." *The Journal of Communication* 11:141-148; September 1961.

Defense arousal prevents the listener from concentrating upon the message. Not only do defensive communicators send off multiple value, motive, and affect cues, but also defensive recipients distort what they receive. As a person becomes more and more defensive, he becomes less and less able to perceive accurately the motives, the values, and the emotions of the sender. My analyses of tape recorded discussions revealed that increases in defensive behavior were correlated positively with losses in efficiency in communication.² Specifically, distortions became greater when defensive states existed in the groups.

The converse, moreover, also is true. The more "supportive" or defense reductive the climate, the less the receiver reads into the communication distorted loadings which arise from projections of his own anxieties, motives, and concerns. As defenses are reduced, the receivers become better able to concentrate upon the structure, the content, and the cognitive meanings of the message.

In working over an eight-year period with recordings of discussions occurring in varied settings, I developed the six pairs of defensive and supportive categories presented in Table I. Behavior which a listener perceives as possessing any of the characteristics listed in the left-hand column arouses defensiveness, whereas that which he interprets as having any of the qualities designated as supportive reduces defensive feelings. The degree of which these

²Jack R. Gibb. "Defense Level and Influence Potential in Small Groups." *Leadership and Interpersonal Behavior*. Edited by L. Petrullo and B.M. Bass. New York: Holt, Reinhart and Winston, 1961, pps. 66-81.

reactions occur depends upon the personal level of defensiveness and upon the general climate in the group at the time.³

Speech or other behavior which appears evaluative increases defensiveness. If by expression, manner of speech, tone of voice, or verbal content the sender seems to be evaluating or judging the listener, then the receiver goes on guard. Of course, other factors may inhibit the reaction. If the listener thought that the speaker regarded him

TABLE I

CATEGORIES OF BEHAVIOR CHARACTERISTIC OF SUPPORTIVE
AND DEFENSIVE CLIMATES IN SMALL GROUPS

DEFENSIVE CLIMATES

1. Evaluation
2. Control
3. Strategy
4. Neutrality
5. Superiority
6. Certainty

SUPPORTIVE CLIMATES

1. Description
2. Problem Orientation
3. Spontaneity
4. Empathy
5. Equality
6. Provisionalism

as an equal and was being open and spontaneous, for example, the evaluativeness in a message would be neutralized and perhaps not even perceived. This same principle applies equally to the other five categories of potentially defense-producing climates. The six sets are interactive.

Because our attitudes toward other persons are frequently, and often necessarily, evaluative, expressions which the defensive person will regard as nonjudgmental are hard to frame. Even the simplest question usually conveys

³Jack R. Gibb. "Sociopsychological Processes of Group Instruction." *The Dynamics of Instructional Groups*. Edited by N.B. Henry. Fifty-ninth Yearbook, Part II, National Society for the Study of Education, 1960. pps. 115-135.

the answer that the sender wishes or implies the response that would fit into his value system. A mother, for example, immediately following an earth tremor that shook the house, sought for her small son with the question: "Bobby, where are you?" The timid and plaintive "Mommy, I didn't do it." indicated how Bobby's chronic mild defensiveness predisposed him to react with a projection of his own guilt and in the context of his chronic assumption that questions are full of accusation.

Anyone who has attempted to train professionals to use information-seeking speech with neutral affect appreciates how difficult it is to teach a person to say even the simple "Who did that?" without being seen as accusing. Speech is so frequently judgemental that there is a reality base for the defensive interpretations which are so common.

When insecure, group members are particularly likely to place blame, to see others as fitting into categories of good or bad, to make more judgements of their colleagues, and to question the value, motive and affect loadings of the speech which they hear. Since value loadings imply a judgement of others, a belief that the standards of the speaker differ from his own, causes the listener to become defensive.

Descriptive speech, in contrast to that which is evaluative, tends to arouse a minimum of uneasiness. Speech acts which the listener perceives as genuine requests for information or as material with neutral loadings is descriptive. Specifically, presentations of feelings, events,

perceptions or processes which do not ask or imply that the receiver change behavior or attitude are minimally defense producing. The difficulty in avoiding overtone is illustrated by the problems of news reporters in writing stories about unions, communists, Negroes and religious activities without tipping off the "party" line of the newspaper. One can often tell from the opening words in a news article which side the newspaper's editorial policy favors.

Speech which is used to control the listener evokes resistance. In most of our social intercourse someone is trying to do something to someone else--to change an attitude, to influence behavior or to restrict the field of activity. The degree to which attempts to control produce defensiveness depends upon the openness of the effort, for a suspicion that hidden motives exist heightens resistance. For this reason, attempts of nondirective therapists and progressive educators to refrain from imposing a set of values, a point of view or a problem solution upon the receivers meet with many barriers. Since the norm is control, noncontrollers must earn the perceptions that their efforts have no hidden motives. A bombardment of persuasiveness "messages" in the fields of politics, education, special causes, advertising, religion, medicine, industrial relations and guidance has bred cynical and paranoid responses in listeners.

Implicit in all attempts to alter another person is the assumption by the change agent that the person to be altered

is inadequate. That the speaker secretly views the listener as ignorant, unable to make his own decisions, uninformed, immature, unwise or possessed of wrong or inadequate attitudes is a subconscious perception which gives the latter a valid base for defensive reactions.

Methods of control are many and varied. Legalistic insistence on detail, restrictive regulations and policies, conformity norms and all laws are among the methods. Gestures, facial expressions, and other forms of nonverbal communication, and even such simple acts as holding a door open in a particular manner are means of imposing one's will upon another and hence are potential sources of resistance.

Problem orientation, on the other hand, is the antithesis of persuasion. When the sender communicates a desire to collaborate in defining a mutual problem and in seeking its solution, he tends to create the same problem orientation in the listener; and, of greater importance, he implies that he has no predetermined solution, attitude or method to impose. Such behavior is permissive in that it allows the receiver to set his own goals, make his own decisions and evaluate his own progress--or to share with the sender in doing so. The exact method of attaining permissiveness are not known, but they must involve a constellation of cues and they certainly go beyond mere verbal assurances that the communicator has no hidden desires to exercise control.

When the sender is perceived as engaged in a stratagem involving ambiguous and multiple motivations, the receiver

becomes defensive. No one wishes to be a guinea pig, a role player or an impressed actor, and no one likes to be the victim of some hidden motivation. That which is concealed, also, may appear larger than it really is with the degree of defensiveness of the listener determining the perceived size of the suppressed element. The intense reaction of the reading audience to the material in the *Hidden Persuaders* indicates the prevalence of defensive reactions to multiple motivations behind strategy. Group members who are seen as "taking a role," as feigning emotion, as toying with their colleagues, as withholding information or as having special sources of data are especially resented. One participant once complained that another was "using a listening technique" on him!

A large part of the adverse reaction to much of the so-called human relations training is a feeling against what are perceived as gimmicks and tricks to fool or to "involve" people, to make a person think he is making his own decision or to make the listener feel that the sender is genuinely interested in him as a person. Particularly violent reactions occur when it appears that someone is trying to make a stratagem appear spontaneous. One person has reported a boss who incurred resentment by habitually using the gimmick of "spontaneously" looking at his watch and saying, "My gosh, look at the time--I must run to an appointment." The belief was that the boss would create less irritation by honestly asking to be excused.

Similarly, the deliberate assumption of guilelessness and natural simplicity is especially resented. Monitoring the tapes of feedback and evaluation sessions in training groups indicates the surprising extent to which members perceive the strategies of their colleagues. This perceptual clarity may be quite shocking to the strategist, who usually feels that he has cleverly hidden the motivational aura around the "gimmick."

This aversion to deceit may account for one's resistance to politicians who are suspected of behind-the-scenes planning to get his vote, to psychologists whose listening apparently is motivated by more than the manifest or content-level interest in his behavior, or to the sophisticated, smooth or clever person whose "oneupmanship" is marked with guile. In training groups the role-flexible person frequently is resented because his changes in behavior are perceived as strategic maneuvers.

In contrast, behavior which appears to be spontaneous and free of deception is defense reductive. If the communicator is seen as having a clean id, as having non-complicated motivations, as being straightforward and honest and as behaving spontaneously in response to the situation, he is likely to arouse minimal defense.

When neutrality in speech appears to the listener to indicate a lack of concern for his welfare, he becomes defensive. Group members usually desire to be perceived as valued persons, as individuals of special worth and as objects of concern and affection. The clinical, detached,

objects of concern and affection. The clinical, detached, person-is-an-object-of-study attitude on the part of many psychologist-trainers is resented by group members. Speech with low affect that communicates little warmth or caring is in such contrast with the affect-laden speech in social situations that it sometimes communicates rejection.

Communication that conveys empathy for the feelings and respect for the worth of the listener, however, is particularly supportive and defense reductive. Reassurance results when a message indicates that the speaker identifies himself with the listener's problems, shares his feelings and accepts his emotional reactions at face value. Abortive efforts to deny the legitimacy of the receiver's emotions by assuring the receiver that he need not feel bad, that he should not feel rejected, or that he is overly anxious, though often intended as support giving, may impress the listener as lack of acceptance. The combination of understanding and empathizing with the other person's emotions with no accompanying effort to change him apparently is supportive at a high level.

The importance of gestural behavioral cues in communicating empathy should be mentioned. Apparently spontaneous facial and bodily evidences of concern are often interpreted as especially valid evidence of deep-level acceptance.

When a person communicates to another that he feels superior in position, power, wealth, intellectual ability,

physical characteristics or other ways, he arouses defensiveness. Here, as with the other sources of disturbance, whatever arouses feelings of inadequacy causes the listener to center upon the affect loading of the statement rather than upon the cognitive elements. The receiver then reacts by not hearing the message, by forgetting it, by competing with the sender, or by becoming jealous of him.

The person who is perceived as feeling superior communicates that he is not willing to enter into a shared problem-solving relationship, that he probably does not desire feedback, that he does not require help, and/or that he will be likely to try to reduce the power, the status or the worth of the receiver.

Many ways exist for creating the atmosphere that the sender feels himself equal to the listener. Defenses are reduced when one perceives the sender as being willing to enter into participative planning with mutual trust and respect. Differences in talent, ability, worth, appearance, status and power often exist, but the low defense communicator seems to attach little importance to these distinctions.

The effects of dogmatism in producing defensiveness are well known. Those who seem to know the answers, to require no additional data and to regard themselves as teachers rather than as co-workers tend to put others on guard. Moreover, in my experiment, listeners often perceived manifest expressions of certainty as connoting inward feelings of inferiority. They saw the dogmatic individual as needing to

be right, as wanting to win an argument rather than solve a problem, and as seeing his ideas as truths to be defended. This kind of behavior often was associated with acts which others regarded as attempts to exercise control. People who were "right" seemed to have low tolerance for members who were "wrong"--that is, those who did not agree with the sender.

One reduces the defensiveness of the listener when he communicates that he is willing to experiment with his own behavior, attitudes and ideas. The person who appears to be taking provisional attitudes, to be investigating issues rather than taking sides on them, to be problem solving rather than debating, and to be willing to experiment and explore tends to communicate that the listener may have some control over the shared quest or the investigation of the ideas. If a person is genuinely searching for information and data, he does not resent help or company along the way.

Conclusion

The implications of the above material for the parent, the teacher, the manager, the administrator or the therapist are fairly obvious. Arousing defensiveness interferes with communication and thus makes it difficult--and sometimes impossible--for anyone to convey ideas clearly and to move effectively toward the solution of therapeutic, educational, and managerial problems.

UNIT 4: DESCRIBING FEELINGS

Leader Information

Objective: To develop the skill of identifying and accurately communicating feelings or emotional states to another person in words

Step	Time	Schedule	Handouts	Material
1.	2 minutes	Brief schedule of steps.		
2.	5 minutes	Distribute Handout 1 and ask participants to do exercise.	Handout 1	Pencils
3.	10 minutes	Distribute Handout 2. Ask participants to read Handout.	Handout 2	
4.	10 minutes	Share responses to Handout 1 in trios and apply criteria in Handout 2.		
5.	33 minutes	Distribute Handout 3. In 2 small groups ask participants to do Exercise in Handout 3. Read instructions to group.	Handout 3	
6.	10 minutes	Reassemble total group and (1) identify difficulties (2) identify situations when skill might be used.		

Total Time - 70 minutes.

UNIT 4: DESCRIBING FEELINGS

Leader Information

Step	Time	Instructions	Material	Rationale	Objective
1.	2 minutes	Present on newsprint brief schedule of steps	Handout 1.		
2.	5 minutes	Distribute Handout 1; Exercise on Describing Feelings. Ask participants to do the exercise on their own. Encourage them to become involved in the fantasy.	Handout 1. Pencils	To help participants become aware of their own feelings.	To provide experience describing feelings before cognitive material is presented on the skill.
3.	10 minutes	Distribute Handout 2; Description of Feelings. Ask participants to read handout.	Handout 2.	Provides cognitive material.	To enable participants to differentiate between expressing and describing.
4.	10 minutes	Ask participants to form their trios and compare their responses in the exercise. After sharing responses ask participants to critique the responses given in the exercise using the criteria in Handout 1.		Provides a supportive climate for describing feelings to others. Participants can compare their own descriptions of feelings with the criteria in the handout.	To list several feelings for each situation. To facilitate learning what comprises a description of feeling.

Step	Time	Instructions	Material	Rationale	Objective
5.	3 minutes	Ask participants to join their two small groups Distribute Handout 3; Exercise in Communication of Feelings by Words. Explain to participants that this exercise will be done in the small group. Read instructions to the group. Reinforce doing <u>one item at a time.</u>	Handout 3	It is not easy to describe feelings and this exercise points out how expressed feelings can be confused with feelings.	To provide practice with the skill of describing feelings.
6.	30 minutes	Small groups carry out exercise in Handout 3.			To provide immediate feedback about the correctness of their answers.
7.	10 minutes	Ask total group to come together and (1) identify the difficulties they have in attempting to describe feelings (2) identify situations when it might be appropriate to use the skill.		Provide a larger group with more information and individual opinions for discussion. Time to discuss reactions to the skill and its application is needed if the participants are likely to utilize this skill.	To identify when, where, how, the skill of describing feelings can be used appropriately.

Total Time - 70 minutes.

Instructions:

Close your eyes and imagine yourself in the following situations. Attempt to block out all other awareness and concentrate on what is happening to your body. What feelings are you aware of at this time? When you are aware of the feelings write them down. Then write down what you would like to do when you experience these feelings.

Situations:

1. You are walking down the street. It is a beautiful day and you are feeling particularly good today. You see your best friend approaching and you are preparing to stop and talk with him/her. Your friend looks directly at you, then averts his/her eyes, and passes without a word.

(a) I feel

(b) When I feel this way I

2. You have just completed a particularly difficult task. You have spent a great deal of time and energy on this task and feel very pleased with the product. You are anxious to receive someone else's opinion on the completed product. You ask another person whom you respect very highly for his opinion. He tells you that you have done an excellent job and he is very impressed with your work.

(a) I feel

(b) When I feel this way I

3. You have bought a new outfit. You think it looks great on you. You come out to model it for a very special person. His/her reaction is: "What on earth made you think you looked good in that? It looks terrible on you! The color is too bright for you; it makes you look sick. I'm not going anywhere with you in that get-up!"

(a) I feel

(b) When I feel this way I

Description of Feelings

Unit 4
Handout 2

A Basic Communication Skill for Improving Interpersonal Relationships

The problem: To communicate your own feelings accurately or to understand those of others is difficult.

First, expressions of emotion take many different forms. Feelings can express themselves in bodily changes, in action, and in words. (See attached diagram.)

Second, any specific expression of feeling may come from very different feelings. A blush, for example, may indicate that the person is feeling pleased, but it may also indicate that he feels annoyed, or embarrassed, or uneasy.

Likewise, a specific feeling does not always get expressed in the same way. For example, a child's feeling of affection for his teacher may lead him to blush when she stands near his desk, to touch her as he passes her, to watch her as she walks around the room, to tell her "You're nice," to bring his pet turtle to show her, etc., --different forms of expression for the child's feeling of affection.

Communication of feelings, thus, is often inaccurate or even misleading. What looks like an expression of anger, for example, often turns out to result from hurt feelings or from fear.

A further obstacle to the accurate communication of feelings is that your perception of what another is feeling is based on so many different kinds of information. When somebody speaks, you notice more than just the words he says. You note his gestures, voice tone, posture, facial expression, etc. In addition, you are aware of the immediate present situation--the context in which the interaction is occurring. You are aware of whether somebody is watching, for example. And so you make assumptions about how the situation influences what the other is feeling. Beyond all of this you also have expectations based on your past experiences with the other.

You make inferences from all of this information--his words, nonverbal cues, the situational context, your expectations of the other. These inferences are influenced by your own current emotional state. What you perceive the other to be feeling, then, often depends more upon what you are feeling (e.g., to be afraid of or wishing for) than upon the other person's actions or words. For example, if you are feeling guilty about something, you may perceive others as angry with you. If you are feeling depressed and discouraged about yourself, others may seem to be expressing disapproval of you.

And so--communicating your own and understanding the feelings of others is an extremely difficult task. And yet, if you wish others to respond to you as a person, you must help them understand how you feel. Likewise, if you are concerned about the other as a person and about your relationship with him, you must try to understand his emotional reactions.

The skill: Although we usually try to describe our ideas clearly and accurately, we often do not try to describe our feelings clearly. Feelings get expressed in many different ways, but we do not usually attempt to identify the feeling itself.

One way to describe a feeling is to identify or name it. "I feel angry." "I feel embarrassed." "I feel comfortable with you." However, we do not have enough names or labels to encompass the broad range of human emotions, and so we invent other ways to describe our feelings, such as the use of similes. "I feel like a tiny frog in a huge pond." A girl, whose friendly overture had just been rebuffed, said, "I feel like I have just had an arm amputated."

A third way to describe a feeling is to report what kind of action the feeling urges you to do. "I feel like hugging and hugging you." "I'd like to slap you." "I wish I could walk off and leave you."

In addition, many figures of speech serve as descriptions of feelings. "I just swallowed a bushel of spring sunshine."

Describing your own feelings: You try to make clear what feelings you are experiencing by identifying them. The statement must (1) refer to "I", "me", or "my", and (2) specify some kind of feeling by name, simile, action urge, or other figure of speech.

The following examples show the relation between the two kinds of expressions of feeling, (1) those that describe what the speaker is feeling, and (2) those that do not. Notice that expressions of feeling which describe the speaker's emotional state are more precise, less capable of misinterpretation, and, thus, convey more accurately what feelings are affecting the speaker.

Expressing feeling by describing
your emotional state

"I feel embarrassed."
"I feel pleased."
"I feel annoyed."

Expressing feeling without
describing your emotional
state

Blushing and saying
nothing.

"I feel angry!"
"I'm worried about this."
"I feel hurt by what you said."

Suddenly becoming silent
in the midst of a
conversation.

"I enjoy her sense of humor."
I respect her abilities and
competence."
"I love her but I feel I
shouldn't say so."

"She's a wonderful person."

"I hurt too much to hear any
more."

"Shut up!!!"

"I feel angry at myself."

"I'm angry with you."

Because emotional states express themselves simultaneously in words, in actions, and in physiological changes, a person may convey contradictory messages about what he is feeling. For example, his actions (a smile or laugh) may contradict his words (that he is angry). The clearest emotional communication occurs when the speaker's description of what he is feeling matches and, thus, amplifies what is being conveyed by his actions and other nonverbal expressions of feeling.

The aim in describing your own feelings is to start a dialogue that will improve your relationship with the other. After all, others need to know how you feel if they are to take your feelings into account. Negative feelings are indicator signals that something may be going wrong in a relationship with another person. To ignore negative feelings is like ignoring a warning light that indicates that an electrical circuit is overloaded. Negative feelings are a signal that the two of you need to check for misunderstanding and faulty communication.

After discussing how each of you sees the situation or your relationship, you may discover that your feelings resulted from false perceptions of the situation and of his motives. In this case, your feelings would probably change. However, the other may discover that his actions are arousing feelings in you that he wasn't aware of--feelings that others beside you might experience in response to his behavior--and he may change.

In short, describing your feelings should not be an effort to coerce the other into changing so that you won't feel as you do. Rather you report your inner state as just one more piece of information that is necessary if the two of you are to understand and improve your relationship.

Perception check: You describe what you perceive to be the other's inner state in order to check whether you do understand what he feels. That is, you test to see whether you

have decoded his expressions of feeling accurately. You transform his expressions of feeling into a tentative description of his feeling. A good perception check conveys this message, "I want to understand your feelings - is this (making a description of his feelings) the way you feel?"

Examples:

"I get the impression you are angry with me. Are you?"
(NOT: "Why are you so angry with me?" This is mind reading, not perception checking.)

"Am I right that you feel disappointed that nobody commented on your suggestion?"

"I'm not sure whether your expression means that my comment hurt your feelings, irritated you, or confused you."

Note that a perception check (1) describes the other's feelings, and (2) does not express disapproval or approval. It merely conveys, "This is how I understand your feelings. Am I accurate?"

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HOW EMOTIONAL STATES EXPRESS THEMSELVES

Somebody's Actions	Interpreted via Silent Assumptions	Lead to Some Effect in you
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Physiological Responses

Event	Your Decoding System
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Emotional States

Physiological Expression: heart rate,
breathing, blushing, sweating, weeping,
trembling...

Even when you
are unaware of
your feelings,
your emotional
state may
express itself
in these ways.

Expression in Actions: hugging, smiling,
hitting, looking at or away, slouching,
biting lips...

Expression in Words:

COMMANDS:	"Shut up!"
QUESTIONS:	"Is it safe to drive this fast?"
ACCUSATIONS:	"You don't care about me."
NAME-CALLING:	"You're rude."
SARCASM:	"You certainly make a person feel appreciated!"
JUDGMENTS:	
Approval:	"You're wonderful!"
Disapproval:	"You talk too much."

DESCRIPTIONS OF FEELING:

You can describe
your feelings
only when you
are aware of
what they are.

"I hurt too much to hear any more."
"I'm afraid of going this fast."
"It hurt my feelings when you forgot
my birthday."
"I felt put down when you ignored my
comment."
"I resent it that you don't seem to
appreciate what I did for you."
"I really enjoy your sense of humor."
"I'm getting bored and beginning to
tune out."

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An Exercise in Communication of Feelings by Words

Procedure

This exercise is designed to help you learn as you go through it. It is not a test. For this reason do not mark all items before you discuss them. Do one item at a time as the following steps show.

- 1st - Read the introductory paragraphs following the procedure to yourself.
- 2nd - Mark your responses for item 1 only.
- 3rd - Compare your responses to item 1 with those of the other members of your quartet. If you did not all answer alike, discuss the reasons for this.
- 4th - One member of your quartet should now read aloud the paragraph which discusses the responses to item 1. (See "Discussion of Responses to Exercise F-1") Discuss this until you all believe you understand the point of it.
- 5th - Repeat steps 2, 3, and 4 for item 2. Then continue this process in turn for each item until you have completed all ten items.

Introduction

Any spoken statement can convey feelings. Even the factual report, "It's three o'clock" can be said so that it expresses anger or disappointment. However, the words do not convey the feelings; the speaker's voice tone, emphasis, gestures, facial expression carry the message of anger or disappointment.

The content of some sentences, however, expresses feelings even when you cannot see or hear the speaker himself. The kind of sentence itself reveals that feelings are present in the speaker.

In each set below, all the sentences convey feeling, i.e., any of them could have been spoken by the same person in the same situation. Each sentence, however, may be either of two different ways of communicating feelings by words.

1. The sentence conveys feeling by describing what the speaker is feeling.
(Examples: "I am disappointed." "I enjoy you.")
The emotional state of the speaker is the content of the sentence. The speaker's feeling is described by a word or phrase such as "disappointed" or "left-out."
2. The sentence conveys feeling but does not describe

what the speaker feels.

(Examples: "Oh, Heck!" "I thought you'd never get here." "Get out!") Strong feeling obviously is behind each of the examples, but the statement does not describe the feeling itself.

* * * * *

Put a D before each sentence below that conveys feeling by describing the speaker's feeling.

Put a No before each sentence that conveys feeling but does not describe what it is.

- Item 1. () a. Shut up! Not another word out of you!
() b. I'm really annoyed by what you just said.
- Item 2. () a. Can't you see I'm busy? Don't you have eyes?
() b. I'm beginning to resent your frequent interruptions.
() c. You have no consideration for anybody else's feelings. You're completely selfish.
- Item 3. () a. I feel discouraged because of some things that happened today.
() b. This has been an awful day.
- Item 4. () a. You're a wonderful person.
() b. I really like you.
- Item 5. () a. I feel comfortable and free to be myself when I'm around you.
() b. We all feel you're a wonderful person.
() c. Everybody likes you.
- Item 6. () a. If things don't improve around here, I'll look for a new job.
() b. Did you ever hear of a place to work as lousy as this is?
() c. I'm afraid to admit that I need help with my work.
- Item 7. () a. This is a very poor exercise.
() b. I feel this is a very poor exercise.
- Item 8. () a. I feel inadequate when teaching that particular subject.
() b. I am inadequate in teaching that particular subject.
- Item 9. () a. I am a failure--I'll never amount to anything.
() b. That teacher is awful. He didn't teach me anything.

() c. I'm depressed because I did so poorly on
that test.

Item 10. () a. I feel lonely and isolated in my group.

() b. For all the attention anybody pays to what
I say I might as well not be in my group!

() c. I feel that nobody in my group cares whether
I'm there or not.

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Discussion of Responses to Exercise F - 1

The item numbers have been scrambled so that you will not accidentally look at the responses for the following item.

- Item 1: a ... No. Commands such as these convey strong emotion without describing what kind of feeling underlies the commands.
- b ... D. The speaker describes himself as feeling annoyed.
- Item 7: a ... No. A negative value-judgment. It conveys that the speaker has negative feelings but does not say what kind they are.
- b ... No. Although the speaker begins by saying, "I feel ..." he does not then tell what he is feeling. Instead he passes a negative value-judgment on the exercise. Note that merely tacking the words "I feel" on the front of a sentence does not make a description of feeling. People often say "I feel" when they mean "I think" or "I believe," for example, "I feel the Yankees will win." or "I feel it will rain tomorrow."

The speaker could have said that he felt confused or frustrated or annoyed. He would then have been describing his feelings without evaluating the exercise itself.

Although we can disagree with the value-judgment expressed by another, we should not deny that he feels whatever he feels. For example, if Joe says the exercise is poor and Jill says it is good, they may argue about which it "really" is. However, if Joe says he was frustrated by the exercise and Jill says she was pleased and stimulated by it, no argument should follow. Each person's reaction is what it is. Of course, discussing what led each to feel as he does may provide helpful information about each person and about the exercise itself.

Many persons who say they are unaware of what they feel, habitually state value-judgments about others without recognizing that this is the way their positive or negative feelings get expressed.

- Item 10: a ... D. Conveys feelings by describing the speaker as feeling lonely and isolated.
- b ... No. Conveys negative feelings without telling whether the speaker feels angry, lonely, disappointed, hurt, or what.

c ... No. Instead of "I feel" the speaker should have said "I believe." The last part of the sentence really tells what the speaker believes the others feel about him and not what he feels.

Expressions c and a relate to each other as follows: "Because I believe that nobody in my group cares whether I am there or not, I feel lonely and isolated."

Item 4: a ... No. A value-judgment that expresses positive feelings about the other without describing what they are. Does the speaker like the other, respect him, enjoy him, admire him, love him, or what? He does not say.

b ... D. The speaker's positive feeling is described as liking.

Item 2: a ... No. The questions convey strong feeling but do not describe what it is.

b ... D. The speaker's feeling is described as resentment.

c ... No. The speaker's accusations about the other certainly convey strong negative feelings. However, because the feelings are not named we do not know whether the accusations stem from anger, disappointment, hurt, or what.

Item 6: a ... No. Conveys negative feelings by talking about the condition of things in this organization instead of about the speaker's inner state.

b ... No. A question that expresses a negative value-judgment about the organization but does not describe what the speaker is feeling.

c ... D. A clear description of how the speaker feels in relation to his job. He feels afraid.

Expressions a and b are criticisms of the organization that could come from the kind of fear described in c. Notice that expressions that express anger may result from fear. Many expressions of anger are the result of fear, hurt feelings, disappointment, or loneliness.

Item 9: a ... No. The speaker has passed judgment on himself and labeled himself a failure. The statement does not describe what he is feeling.

b ... No. Instead of taking it out on himself, the speaker blames the teacher. This is another value-judgment but not a description of feelings.

c ... D. Conveys feeling by describing the speaker's emotional state - he feels depressed.

Expressions a and c illustrate the important differences between passing judgment on oneself and describing one's feelings. Feelings can and do change. To say that I am depressed does not imply that I will or must always feel the same. However, if I label myself as a failure--if I truly think of myself as a failure--I increase the probability that I will act like a failure. One woman stated this important insight for herself this way, "I always thought I was a shy person. Now I have discovered that I am not shy although at times I feel shy." No longer did she keep herself from trying new things she wanted to be able to do by reminding herself that she was too shy for them.

- Item 5: a ... D. A clear description of how the speaker feels when with the other.
b ... No. "You're a wonderful person" is a value-judgment and not a description of feeling. Secondly, the speaker does not speak for himself but hides behind the phrase "we feel."
c ... No. It is true that a feeling is named in the statement, but the speaker refers to everybody and does not make clear that the feeling is in him. A description of feeling must contain "I", "me", "my", or "mine" to make clear that the feelings are the speaker's own--are in him.

Does it seem more affectionate to you for a person to tell you "I like you." or "Everybody likes you."? Do you find it more difficult to tell another "I like you" or "Everybody likes you."?

- Item 8: a ... D. Describes himself as feeling inadequate.
b ... No. Careful! This sounds much the same as a. However, it says that the person actually is inadequate--not just feels this way. The speaker has passed a negative judgment on himself and labeled himself as inadequate.

This subtle difference was introduced because many people confuse feeling inadequate with being inadequate. A person may feel inadequate when teaching a certain subject and yet do an excellent job of it. Likewise, he may feel adequate and competent in a subject and yet perform poorly.

One sign of emotional maturity may be that a person can perform adequately even when he feels inadequate to the task. He does not let his feelings keep him from doing the best he can because he knows the difference between feelings and performance and that the two do not always match.

- Item 3: a ... D. The speaker describes himself as feeling discouraged.
- b ... No. Conveys negative feelings without describing what they are. The statement appears to tell what kind of day it was when, in fact, it is an expression of the way the speaker is feeling. We cannot tell from an expression like this whether the speaker feels depressed, annoyed, lonely, humiliated, rejected, or what.

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UNIT 5: OVERVIEW OF UNITS 6 to 8

Leader Information

Objective: To introduce and describe to the participants in detail the Carkhuff model.
To familiarize the participants with the goals and method of the second part of the training program.

Step	Time	Schedule	Handouts	Materials
1.	15 minutes	Explain Carkhuff's basic model		
2.	5 minutes	Read Handout 1	Handout 1	
3.	5 minutes	Questions		
4.	3 minutes	Read Handout 2	Handout 2	
5.	5 minutes	Read Handout 3	Handout 3	

Total Time - 33 minutes.

Step	Time	Instructions	Material	Rationale	Objective
1.	15 minutes	Introduce the second part of the training program to the participants. In a didactic presentation acquaint participants with the Basic model presented in Handout 1. Be very thorough in explaining the model.		Orients participants to the basic model of helping relationships developed by Carkhuff.	To familiarize participants with Carkhuff's model. To give a global picture of the model.
2.	5 minutes	Distribute Handout 1; Explanation of the Basic Model. Ask participants to read handout.	Handout 1		
3.	5 minutes	Question period		To prevent confusion and misunderstanding.	To clarify any misunderstandings.
4.	3 minutes	Distribute Handout 2; Description of Units 6 to 8. Ask participants to read Handout 2.	Handout 2	Provides an explanation of the goals and method of the units to follow.	To clarify the goals and method of the remaining units.
5.	5 minutes	Distribute Handout 3; Carkhuff Counsellor Training Scales	Handout 3	To provide a global picture of the scales.	
Total Time - 33 minutes.					

Instruction and Practice in the Communication of Accurate
Empathy, Facilitative Genuineness, and Personally Relevant
Concreteness

A. Explanation of the Basic Model

The basic model that we will be working from in the next four units is that of Robert Carkhuff. Carkhuff has written several books in helping and human relations in which he discusses the importance of certain helper offered conditions to the outcome of the helping process. The basic model is that the effects of helping may be for better or for worse and these effects may be accounted for by the level of functioning of the helpers in different helping situations. Carkhuff has found that helpers who are offering high levels of both the responsive and the initiative dimensions (described in Handout 3) achieve significant constructive effects with their clients, patients, students, and children.

Carkhuff's basic developmental model in very global terms is this: mother prepares the child for mother and father. This means that mother, who is nurturant and nourishing and protective, prepares the child for a father who is directional and action-oriented. The effective helper is both mother and father. He has incorporated both the responsive components of the mother and the assertive or action-oriented components of the father. He can understand his internal and external physical, emotional, and

intellectual world with sensitivity and can act upon these worlds with responsibility.

Thus, the effective helping process is broken down into the two components of understanding and action. The facilitative dimensions of empathy, respect, genuineness, and concreteness are those offered in response to the expressions of the person being helped while the action-oriented dimensions of self-disclosure, confrontation, and immediacy are initiated by the helper. There is significant overlap of the dimensions with some dimensions being both facilitative and action-oriented, e.g., genuineness and concreteness.

To understand the helping process it is possible to divide the activities of the helper and the helpee and divide the phases of the helping process. In Figure 1 the top row represents the activities of the helper and the bottom row represents the activities of the helpee.

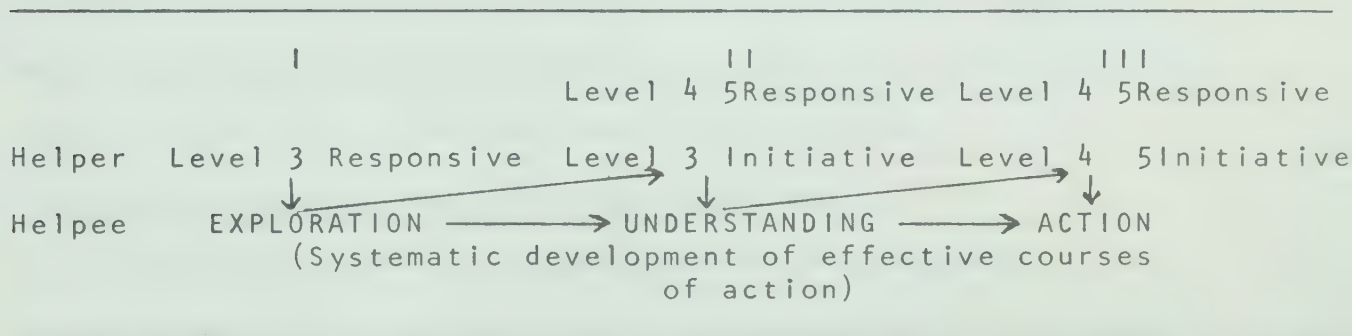


Figure 1. Schematic representation of helper and helpee activities in exploratory, understanding and action phases of helping.

Phase 1 of Helping: Helpee Self-Exploration

In the first phase the necessary goal of the helping process is self-exploration by the helpee of himself, his

feelings, his experiences, his problem areas. The most effective way to get to self-exploration is to be responsive to the feelings and experiences of the helpee. Thus, during this period of self-exploration the helper is most effective when he responds to the helpee in terms of the feelings and experiences he is expressing and does not go beyond them. In other words, the helper does not go into moderate interpretations or depth reflections initially but tries to respond to the helpee at the level he is expressing himself.

At level 3, on scales from 1 to 5, the helper is interchangeable in his understanding that he is communicating to the helpee. He is unconditional in the kind of positive regard that he is communicating. Operationally, this means that the helper is suspending his own feelings, his values, and his judgments that might have a potentially deliterious effect on the client. Thus, our initial goal in training is to achieve level 3 of the responsive dimensions. We will begin by focussing on one dimension, empathic understanding, and our goal is to achieve level 3 of empathy.

Phase 2 of Helping: Helpee Understanding

The purpose of self-exploration is to help the individual locate the important pieces necessary for better self-understanding. When he self-explores he gets a piece here, a piece there, and a piece there. He cannot put the pieces together. At the point that the helpee gives the helper cues that he is ready for the helper to do something with the pieces; it is the helper's responsibility to go to

higher levels of empathic understanding, to go to levels 4 and 5. At the same time that the helper goes beyond the material that an individual is giving, he is also initiating. At this point the helper automatically starts to introduce the initiative dimensions (see Figure 1). It is important to stress that helpers who confront at the highest levels are also those who are most empathic, warm, genuine and concrete. Helpers who are most empathic are also most confronting. The dimensions go together at the highest levels.

Your goal or purpose is to move toward additive levels of empathy, respect, genuineness, and concreteness. We will try to do this here with this group. At the same time that you move toward additive levels, you are automatically going beyond the material that the helpee has given you and therefore you automatically are starting to initiate from your own experiences. The purpose in all this is to help the individual understand himself more fully, so that he can put the pieces together. The goal then of the second phase of helping is understanding, helpee understanding (see Figure 1).

Phase 3 of Helping: Helpee Action

Understanding has no purpose in and of itself if it is not translated into action or into behavior. Thus, the helper must initiate himself more fully, because his initiating on the basis of his own experience provides a model for action. We are talking in this final stage about a helper who is functioning at both levels 4 and 5 on both

initiative dimensions and responsive dimensions (see Figure 1). The function of the helper is to get the helpee to act on his understanding of the problem that he explores. One goes through three phases here:

1. the helper responds at minimal levels so that the helpee will explore himself and thus the helper will be able to put the pieces together, because that is his expertise;
2. so that the helpee will be able to understand himself more deeply in order that the helper can start to initiate in terms of his own experience; and
3. thus enable the helpee to act upon his new understanding of himself.

This is an ongoing process because once the helpee acts he opens new areas of exploration, learns new things about himself, and increases the effectiveness and accuracy of his actions on the next action. Thus, an ongoing or lifelong kind of learning process has been initiated.

B. Description of Units 6 through 8

Unit 5
Handout 2

Units 6 through 8 are designed along the same lines as previous units. However, in this part of the training you will be concentrating on the specific facilitative dimensions of accurate empathy, facilitative genuineness, and personally relevant concreteness. Your goal is to move toward high levels of empathy, respect, genuineness, and concreteness. This goal will be reached by combining 3 sources of learning:

1. Modelling - the leader will communicate facilitative levels of empathy, genuineness, and concreteness upon which you can model your own communications.

2. Direct teaching - the leader will focus on specific didactic teaching of the dimensions and use the Carkhuff scales for shaping your responses toward high levels of empathy, genuineness, and concreteness.

3. Experiential learning - you will be given actual practice in the helping role in which you attempt to communicate high levels of empathy, genuineness, and concreteness.

Handout 3 provides a brief outline of the 7 Carkhuff scales. You will receive specific training in 3 of the scales: Accurate Empathy, Genuineness, and Concreteness, in the remaining units. We will begin with Accurate Empathy which research has shown to be the most important facilitative dimension.

CARKHUFF COUNSELLOR TRAINING SCALES

Unit 5
Handout 3

<u>Counselor Characteristics</u>	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4	LEVEL 5
<u>Accurate Empathy</u>	ignores, even detracts	responds but sub-tracts affect, dis-torts meaning	usually accurate; almost literal .duplication	accurate and adds deeper meaning than was expressed	accurate to all deeper feelings, "tuned in"
<u>Respect, Warmth Regard</u>	total lack of respect for feelings, exper-ience and potentials.	displays little warmth, mechanical or passive or ignores	communicates a positive respect and that the helpee matters to counsellor	a very deep caring for the helpee	deepest respect for helpee as a person
<u>Genuineness, Congruence</u>	discrepancy between inner experience and potentials	professional (role) manner that sounds rehearsed or genuine negative responses	sincere but not really involved; no negative cues between feelings and words but no positive cues either	genuine responses (positive or negative) in a non-destructive manner	freely and deeply himself; constructive even if responses "hurtful"
<u>Self-Disclosure</u>	actively attempts to remain ambiguous or unknown	briefest and vague self-disclosures	gives personal ideas, feelings but does not disclose his uniqueness	gives personal atti-tudes, ideas, and experience in accord-ance with helpee's concerns	reveals self and discloses at most intimate level in keeping with helpee's needs
<u>Concreteness, Specificity</u>	leads or allows helpee to deal only with vague generalities	leads or allows helpee to deal with even personally relevant material in a vague manner	sometimes guides personally relevant and concrete instances but not fully developed	guides discussion to specifics in almost all instances	always involves helpee in specific feelings and events regardless of emotional content
<u>Confrontation</u>	ignores all discrepancies in helpee's behavior	though not explic-ity accepting dis-crepancies remains silent re most of them	raises questions but does not point out diverging directions	confronts directly and explicitly	confronts all discrepancies sensi-tively and perceptively
<u>Immediacy</u>	ignores all helpee communications that deal with the relationship	disregards most talk about the relationship	makes literal response - open to interpretation of immediacy but not explicit	relates helpee's responses to himself in a tentative way	relates helpee's expressions directly and specifically to himself

UNIT 6: THE COMMUNICATION OF EMPATHIC UNDERSTANDING

Leader Information

Objective: To provide a highly specific training sequence which will enlarge repertoires of the participants to include responses that are high in empathic understanding.

Step	Time	Schedule	Handouts	Materials
1.	2 minutes	Present brief schedule of steps.		Tape-recorder V.T.R. if available.
2.	4 minutes	Distribute and explain Handout 1.	Handout 1	
3.	2 minutes	Distribute Handout 2.	Handout 2	
4.	10 minutes	Introduce first stage of empathy training. Play Tape (Rogers). Participants pair and role-play helper-helper interaction. Group rates instruction on <u>interchangeability</u> .		
5.	25 minutes	Interrupt and ask participants to formulate additional interchangeable responses in addition to rating interaction. Interrupt after 10 minutes and encourage brief responses that capture the feeling. Continue until all participants have role-played the helper role.		

Step	Time	Schedule	Handouts	Materials
6.	32 minutes	<p>Introduce second stage of empathy training. Ask participants to adopt a helper-helper-helper response sequence in the role-plays and continue aiming for an interchangeable response.</p> <p>Group will rate and formulate their own responses to which helper responds. Use tape-recorder if necessary. When response is additive or subtractive ask group to state specific level.</p>		
7.		<p>Introduce third stage.</p> <p>When interchangeable base is established move on to extended interactions.</p> <p>Participants rate <u>modal</u> level of empathy. Suggest that role-play could center on real feelings in the group setting.</p>		
8.		<p>Play Truax training tape.</p> <p>Introduce fourth stage when all participants have role-played helper. Ask participants to establish interchangeable base in an extended interaction, then give an additive response. Use paradigm like: "What I really hear you saying is..." or "What this all adds</p>		

Step	Time	Schedule	Handouts	Materials
		<p>up to me is this."</p> <p>Participants rate helper on (1) Interchangeable base (2) Additive response.</p> <p>Interrupt after several role-plays. Ask helper to indicate when he is going to give additive response. Participants rate and formulate their own additive response to which helpee will respond. Continue role-plays until all participants have given an additive.</p>		

9.

Total Time - Minutes.

UNIT 6: THE COMMUNICATION OF EMPATHIC UNDERSTANDING

Leader Information

Step	Time	Instructions	Handouts	Rationale	Objective
1.	2 minutes	Present brief schedule of steps.			To provide an overview of the unit.
2.	2 minutes	Distribute Handout 1; Empathy Scale. Explain that in this unit one dimension will be dealt with - empathy. The immediate goal for the initial training in empathy is for the helper to make an interchangeable response with that of the helpee. The response will be interchangeable not in terms of the content that the helpee is expressing but in terms of the feeling. The participants can utilize the content and integrate it with the feeling, but the feeling is what will be talked about.	Handout 1	Provides cognitive material.	To provide cognitive material.
3.	2 minutes	Explain Handout 1 to participants by demonstrating scale on board. Distribute Handout 2; Guidelines for Communication of Empathy.	Handout 2		

Step	Time	Instructions	Handouts	Rationale	Objective
4.	2 minutes	<p>Play 15 minutes of Roger's Tape (The Case of Mike).</p> <p>Ask participants to pair off and have helper-helpee roles. <u>Initially</u> the participants <u>will</u> <u>role-play</u> problems (some kind of problem that someone may have brought to them). Later the participants <u>will</u> deal with a <u>personally</u> relevant problem, maybe something that transpired in the group. However, each individual can be the guide of this and stop it at any point. The task is as follows: first the helpee is going to role-play a problem and the helper is going to make a response, and then the group is going to make a rating as to whether or not the response was interchangeable.</p> <p>The task is to lay the responses side by side in terms of feeling and meaning and ask the question: "Could the helpee have said what the helper said and vice versa?" If the answer is yes we call them interchangeable and rate at level 3. Each participant</p>		<p>Provides a basis for the discussion of empathy.</p> <p>Provides feedback to the participants.</p> <p>Allows leader to keep abreast of the learning that is going on.</p> <p>Provides participant with opportunity to experience themselves as helpers and helpees.</p>	<p>To enable participants to understand what empathy is.</p> <p>To introduce a shaping process that incorporates evaluations of self and others.</p> <p>To correct any misconceptions as soon as they arise.</p>

Step	Time	Instructions	Handouts	Rationale	Objective
		will have the opportunity to experience himself in the role of a helper and helpee.			
5.	10 minutes	<p>Begin rol-playing in pairs by asking one pair to begin. One member will be the helpee and give a response and the helper will give a response. Then each member of the group will make a rating as to whether it was interchangeable. Then have the pair switch roles. It is not necessary to change the problem each time. The pair could carry on with the same problem. The helpee rates each response as well.</p>			
6.	10 minutes	<p>After several role-plays interrupt and add another dimension. In addition to rating ask participants to formulate additional interchangeable responses to the helpee communication. Allow time for participants to give these after the role-play and rating. Continue role-plays incorporating the new dimension. The tape-recorder can be used to replay the helpee expression.</p>		<p>Provides the opportunity to hear a series of other responses.</p>	<p>To enlarge the response repertoire of the participants.</p>

Step	Time	Instructions	Handouts	Rationale	Objective
7.	15 minutes	After several role-plays interrupt again and emphasize the importance of giving brief responses so they don't entangle themselves. If they have captured the feeling leave it at that. Also tell them to avoid stating responses as question. Continue until everyone has had an opportunity to role-play.			To provide additional information and direction.
8.	2 minutes	Interrupt and introduce the next stage. In order to make a decision about whether the helper's response would have allowed the helpee to go on it is necessary to get another response from the helpee. Thus ask participants to give a helpee-helper-helpee response sequence in the role-plays. Following the sequence, the group will rate and formulate their own responses. Helpers are to continue shooting for a 3 and establish an interchangeable base. If leader does not agree		Provides another way to measure the quality of the helper's response.	To determine whether helper response was additive or subtractive
					To reinforce establishing the interchangeable base.

Step	Time	Instructions	Handouts	Rationale	Objective
		<p>with the ratings say so; be honest. Sometimes the group will be solicitous and give 3 automatically to leave room for themselves.</p> <p>Leader can play it back on tape-recorder if group is doing this and getting off base.</p>			
9.	30 minutes	<p>Role=plays using helper-helper response sequence.</p> <p>Participants rate and give their own responses. Helper responds to other responses if helpful. Aim at 3 (interchangeable base) and when stating that response is subtractive or additive ask participants to give specific level (e.g., 1,2,2,5,4).</p> <p>Continue with role-plays until all group members have established the interchangeable base and can give level 3 responses.</p>		Provides sufficient practice to establish interchangeable base.	To establish interchangeable base before moving on to additive levels.
10.	2 minutes	<p>As soon as interchangeable base is established move on to extended helper-helper interactions. Ask participants to rate the</p>		Provides practice maintaining an	To allow participants to

Step	Time	Instructions	Handouts	Rationale	Objective
		modal level of empathy that the helper is communicating; i.e., level at which helper is most frequently in several exchanges.		interchangeable base.	attempt to maintain an interchangeable base over extended interchanges.
11.		<p>Have participants engage in extended role-plays and rate modal level of empathy. Give all participants opportunity to engage in extended interactions. Suggest that role-play could center around the real feelings of participants in the group setting.</p> <p>Play Truax tape--Selected Counseling Excerpts. Introduce the next stage. Ask participants to attempt to reach an additive level. First establish an interchangeable base giving as many responses as are needed. When the pieces are falling into place, make an additive response.</p> <p>For the additive response use a paradigm like, "What I really hear you saying is..." or "What this all adds up to me is this." Participants have</p>			
12.				<p>The broader the interchangeable base communication established, the higher the probability of an additive response when one is attempted.</p>	To make an additive response.

Step	Time	Instructions	Handouts	Rationale	Objective
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Responsibility of rating helper at two levels:
 (1) Did he lay the interchangeable base? (2) Did he make the additive response?

Interrupt after several role-plays. Ask helper to indicate when he is going to give an additive response.

Ask participants to rate on whether the base is laid, whether the response is additive, and also to formulate their own additive responses.

Continue role-plays and have participants give their own additive responses to which the helpee will respond quickly.

Continue role-plays until all participants have experimented with an additive response.

Provides the opportunity to hear a series of other responses.

To enlarge the response repertoire of the participants.

13.

Total Time - minutes.

SENTENCE STEMS FOR ROLE-PLAYS

- | | |
|----------------------------|------------------------------|
| 1. I like ... | 19. I suffer ... |
| 2. The happiest time ... | 20. I failed ... |
| 3. I want to know ... | 21. My mind ... |
| 4. Back home ... | 22. The future ... |
| 5. I regret ... | 23. I need ... |
| 6. At bedtime ... | 24. I am best when ... |
| 7. Men ... | 25. Sometimes ... |
| 8. The best ... | 26. What pains me ... |
| 9. What annoys me ... | 27. I hate ... |
| 10. People ... | 28. This place ... |
| 11. A mother ... | 29. I am very ... |
| 12. I feel ... | 30. The only trouble ... |
| 13. My greatest fear ... | 31. I wish ... |
| 14. In school ... | 32. I secretly ... |
| 15. I can't ... | 33. I ... |
| 16. When I was a child ... | 34. Dancing ... |
| 17. My nerves ... | 35. My greatest worry is ... |
| 18. Other people ... | 36. Most women ... |

Empathy: How well have I listened?

Having listened, was I accurate on my interpretation of what he was feeling?

- did I change it slightly?

- did I drain it off?

Was I listening with a "preconceived" frame of reference?

Did I add anything? i.e., deeper meaning.

Respect: Did I "put him down"?

How much advice did I dish out?

Was his confidence to deal with things built up?

Did I take away from the uniqueness of his responses?

Does the patient feel free to say anything he chooses, irregardless of the content, of his past experiences or feelings?

Did I protect him? Who did the most work in group?

Genuineness: Was I defensive? Why? How to handle the difference?

Did I sound professional or rehearsed?

How many times did the group turn to me for "words of wisdom"?

Is the patient able to ask me personal questions and am I able to share?

Was I honest about the way I felt? If so, was this expressed in a constructive manner?

Am I open to criticism from the patient? - or
anger, or fear and is any of this happening?

If there is none of this, then how genuine is the
relationship?

EMPATHY SCALE

The first goal in empathy training is to make responses that are interchangeable. If responses are not interchangeable, the helper is some way subtractive of, or additive to the expressions of the helpee. He is subtracting from the feelings and the experiences that the helpee is expressing and in some way preventing the helpee from going on to explore this material more fully. And if the helper goes beyond what the helpee says, then it is in some way additive (see Figure 2). If the helper goes beyond the material, then he enables the helpee to go to deeper levels of exploration and deeper levels of understanding. These are additive dimensions.

<u>Levels of Functioning</u>	5	+	+	(plus-plus))	
	4	+		(plus))	Additive to helpee's expressions
	3			<u>Interchangeable in terms of feeling and meaning expressed by the helpee</u>		
	2	-		(minus))	
	1	-	-	(minus-minus))	Subtractive of helpee's expressions

Figure 2. Operationalization of levels of empathy.

Example:

If the individual expresses something about his sadness the helper might say, "You feel sad." This would be an interchangeable response. If you want to compliment that feeling with meaning you might say, "You feel sad because

she was the most important person in the world to you and now she's gone." In this way you have utilized the content of his message to complement the feeling with the personal meaning that it had for him. This again is an interchangeable response and you might notice the similarity between this communication and the skill we called Paraphrase in Unit 2.

SCALE 1

EMPATHIC UNDERSTANDING IN INTERPERSONAL PROCESSES:

A SCALE FOR MEASUREMENT

Level 1

The verbal and behavioral expressions of the first person either *do not attend to* or *detract significantly* from the verbal and behavioral expressions of the second person(s) in that they communicate significantly less of the second person's feelings than the second person has communicated himself.

Example: The first person communicates no awareness of even the most obvious, expressed surface feelings of the second person. The first person may be bored or uninterested or simply operating from a preconceived frame of reference which totally excludes that of the other person(s).

In summary, the first person does everything but express that he is listening, understanding, or being sensitive to even the feelings of the other person in such a way as to detract significantly from the communications of the second person.

Level 2

While the first person responds to the expressed feelings of the second person(s), he does so in such a way that he *subtracts noticeable affect from the communications of* the second person.

Example: The first person may communicate some awareness of obvious surface feelings of the second person, but his communications drain off a level of the affect and distort the level of meaning. The first person may communicate his own ideas of what may be going on, but these are not congruent with the expressions of the second person.

In summary, the first person tends to respond to other than what the second person is expressing or indicating.

Level 3

The expressions of the first person in response to the expressed feelings of the second person(s) are essentially *interchangeable* with those of the second person in that they express essentially the same affect and meaning.

Example: The first person responds with accurate understanding of the surface feelings of the second person but may not respond to or may misinterpret the deeper feelings.

In summary, the first person is responding so as to neither subtract from nor add to the expressions of the second person; but he does not respond accurately to how that person really feels beneath the surface feelings. Level 3 constitutes the minimal level of facilitative interpersonal functioning.

Level 4

The responses of the first person add noticeably to the expressions of the second person(s) in such a way as to express feelings a level deeper than the second person was able to express himself.

Example: The facilitator communicates his understanding of the second person at a level deeper than they were expressed, and thus enables the second person to experience and/or express feelings he was unable to express previously.

In summary, the facilitator's responses add deeper feeling and meaning to the expressions of the second person.

Level 5

The first person's responses add significantly to the feeling and meaning of the expressions of the second person(s) in such a way as to (1) accurately express feelings levels below what the person himself was able to express or (2) in the event of on going deep self-exploration on the second person's part, to be fully with him in his deepest moments.

Example: The facilitator responds with accuracy to all the person's deeper as well as surface feelings. He is "together" with the second person or "tuned in" on his wave length. The facilitator and the other person might proceed together to explore previously unexplored areas of human existence.

In summary, the facilitator is responding with a full awareness of who the other person is and a comprehensive and accurate empathic understanding of his deepest feeling.

The Communication of Empathy

Guidelines:

1. The helper will find that he is most effective in communicating an empathic understanding when he concentrates with intensity upon the helpee's expressions, both verbal and non-verbal.
2. The helper will find that initially he is most effective in communicating empathic understanding when he concentrates upon responses that are interchangeable with those of the helpee.
3. The helper will find that he is most effective in communicating empathic understanding when he formulates his responses in language that is most attuned to the helpee.
4. The helper will find that he is most effective in communicating empathic understanding when he responds in a feeling tone similar to that communicated by the helpee.
5. The helper will find that he is most effective in communicating empathic understanding when he is most responsive.
6. The helper will find that he is most effective in communicating empathic understanding when, having established an interchangeable base of communication, he moves tentatively toward expanding the helpee's experience at higher levels.
7. The helper will find that he is most effective in communicating empathic understanding when he concentrates upon what is NOT being expressed by the HELPEE.
8. The helpee's behavior is the best guideline to assess the effectiveness of the helper's responses.

SCALE 2

THE COMMUNICATION OF RESPECT IN INTERPERSONAL PROCESSES:

A SCALE FOR MEASUREMENT

Level 1

The verbal and behavioral expressions of the first person communicate a clear lack of respect (or negative regard) for the second person(s).

Example: The first person communicates to the second person that the second person's feelings and experiences are not worthy of consideration or that the second person is not capable of acting constructively. The first person may become the sole focus of evaluation.

In summary, in many ways the first person communicates a total lack of respect for the feelings, experiences, and potentials of the second person.

Level 2

The first person responds to the second person in such a way as to communicate little respect for the feelings, experiences, and potentials of the second person.

Example: The first person may respond mechanically or passively or ignore many of the feelings of the second person.

In summary, in many ways the first person displays a lack of respect or concern for the second person's feelings, experiences, and potentials.

Level 3

The first person communicates a positive respect and concern for the second person's feelings, experiences, and potentials.

Example: The first person communicates respect and concern for the second person's ability to express himself and to deal constructively with his life situation.

In summary, in many ways the first person communicates

that who the second person is and what he does matter to the first person. Level 3 constitutes the minimal level of facilitative interpersonal functioning.

Level 4

The facilitator clearly communicates a very deep respect and concern for the second person.

Example: The facilitator's responses enables the second person to feel free to be himself and to experience being valued as an individual.

In summary, the facilitator communicates a very deep caring for the feelings, experiences, and potentials of the second person.

Level 5

The facilitator communicates the very deepest respect for the second person's worth as a person and his potentials as a free individual.

Example: The facilitator cares very deeply for the human potentials of the second person.

In summary, the facilitator is committed to the value of the other person as a human being.

UNIT 7: THE COMMUNICATION OF FACILITATIVE GENUINENESS

Leader Information (Units on Description of Feelings and Behavior Description are relevant and could be helpful here)

Objective: To provide a training sequence which will enlarge repertoires of participants to include responses that are high in facilitative genuineness.

Step	Time	Instructions	Handouts	Rationale	Objective
1.	2 minutes	Brief schedule of steps			To provide an overview.
2.	5 minutes	Distribute Handout 1. facilitative Genuineness in Helping Relationships. Explain facilitative genuineness to participants. Ask participants to read handout.	Handout 1	Provides cognitive material.	To provide cognitive material.
3.	5 minutes	Distribute Handout 2; Scale 3: Facilitative Genuineness and Handout 3; Guidelines for the communication of Facilitative Genuineness.	Handout 2 Handout 3		
4.	10 minutes	Discussion of facilitative genuineness and what it is.		Opportunity to ask questions and clarify understanding.	To clarify understanding of cognitive material.
5.	3 minutes	Explain that in learning to communicate facilitative genuineness, it is essential that the <u>helper</u> be aware of his own <u>feelings</u> and		Opportunity for participants to state genuine responses he has towards another	To allow part- icipants to experience themselves being genuine

Step	Time	Instructions	Handouts	Rationale	Objective
		<p>experiences as he interacts with another person. The group participants have spent enough time together by now to have some feelings and responses toward one another, which they could share.</p> <p>Ask participants to form a pair with someone who they have genuine feelings toward-the feelings could be both negative and positive. The purpose of the exercise will be to share those genuine responses and explore them more fully with the other person. Each member of the pair will have an opportunity to share his genuine responses with the other. Instruct the person receiving the feelings and responses to become aware of his own feelings and inner experience. He is to try to respond in a non-defensive manner and share his own genuine feelings in response to the other person's feelings, e.g., If you feel embarrassed by what your partner is saying tell him; if you are pleased, say so; if hurt, say so.</p>		<p>person and to receive genuine responses.</p>	<p>with another so they can become more genuine as helpers.</p>

Step	Time	Instructions	Handouts	Rationale	Objective
6.	10 minutes	<p>Ask participants to form pairs. In doing exercise a) ask one member to share his feelings and responses toward the other first. The receiver will respond to this with his genuine feelings; b) the receiver will then share his feelings and responses to which his partner will respond. Use stems like: "When I'm with you I feel, sometimes I feel..."</p>			
7.	5 minutes	<p>Following the exercise interrupt and ask pairs to let each other know about any behaviors that did not fit with what the partner said he was feeling at the moment, e.g., he may have looked confused and hurt, but said he felt good about what his partner was saying.</p>		<p>Opportunity to receive feedback on body cues that conflict with what is said.</p>	<p>To become aware of in-genuine responses.</p>
8.	3 minutes	<p>Ask participants to join large group. State that in the next stage of training the participants will form new pairs and share one genuine feeling, or response to their partner in the group. The person sharing can use such stems</p>		<p>Opportunity to share and respond to genuine responses in a large group.</p>	<p>To begin defining the difference between genuine and ingenuine responses. To begin discussing and understanding the</p>

Step	Time	Instructions	Handouts	Rationale	Objective
		<p>as: "When I'm with you I feel...; I feel...." The person receiving will respond non-defensively to the other person. He will attempt to become aware of his own feelings in relation to the other person; but in responding will be guided by what would be helpful to the other person and to the relationship. He will give one response. The other members of the group will rate the receiver on his genuineness, and point out any ingenuine responses to him. Each member of the group will have an opportunity to share a genuine feeling or response.</p> <p>In assigning ratings ask group members to use the following criteria:</p> <p>a) was the receiver genuine? b) was he ingenuine (phony)? c) how was he ingenuine? d) how could he have been more genuine (specific responses)?</p> <p>e) ask receiver if he thought he was being genuine and if not, why not?</p>			<p>importance of <u>trust</u> in genuineness. To find out how to be more genuine-specific responses that would be appropriate. To communicate genuine responses to a friend at level 3.</p>

Step	Time	Instructions	Handouts	Rationale	Objective
9.	20 minutes	<p>Ask a specific pair to begin:</p> <ol style="list-style-type: none"> 1) one member share a feeling or response (positive or negative) 2) his partner will respond as he would in Stage 1 of helping by trying to communicate understanding of the feeling in an honest way in one response. <p>The group will rate the receiver on genuineness using the criteria outlined. Give all participants the opportunity to respond at level 3-stage 1 of helping.</p>			<p>To clarify misunderstanding.</p> <p>To begin to understand the difference between a helping relationship and a friendship.</p>
10.	10 minutes	<p>Following the exercise allow time for discussion of the experience if needed. Discuss specifically:</p> <ol style="list-style-type: none"> 1) trust in genuineness. 2) the difference between our communication of genuineness in close relationships and new relationships. 3) risks involved in being genuine 			<p>To learn how to communicate level 3 responses.</p>
11.	2 minutes	<p>Explain to participants that in next stage of helping they will be looking at the helping relationship. Helper-helpee role plays will be used. The helper will respond to the</p>		<p>Opportunity to communicate level 3 responses to a helpee.</p>	

Step	Time	Instructions	Handouts	Rationale	Objective
		<p>helped as he would in Stage 1 of helping. The helper will:</p> <ol style="list-style-type: none"> 1) convey his understanding of the helpseeker's feelings in an honest way. 2) avoid being defensive, phony, intellectual. 3) be helpful and meet needs of helpseeker; his own needs come second. <p>The group will give ratings on the response stating whether it was at level 3, above or below. The leader will demonstrate first with a helpseeker.</p>			
12.	10 minutes	<p>Leader demonstration.</p> <ol style="list-style-type: none"> a) Give one of the participants a role on a piece of paper. Ask helpseeker to play role. Leader respond in role-play below level 3. b) give another participant a role and respond at level 3. <p>Do not tell participants what levels you are demonstrating until they have rated.</p> <p>Discuss differences between two role-plays.</p>		<p>Opportunity to observe the difference between levels 3 and levels below.</p>	<p>To learn the difference between level 3 and lower levels. To observe the effect on the helpseeker and the relationship of low level responses, and level 3 responses.</p>

Step	Time	Instructions	Handouts	Rationale	Objective
13.	2 minutes	<p>Explain to participants that now you would like them to adopt helper-helper roles. Ask the group to form two small groups. Explain that you will provide each member with a role on a slip of paper. Each member will play the helper role and each will play the helper role. Helper give level 3 responses. Those that are not involved in a role-play will rate following the role-plays and suggest other responses. The leader should spend half the time with each group in order to help with the rating.</p>			<p>To practice communicating level 3 genuineness to a helpee. Through rating to learn to discriminate level 3.</p>
14.	30 minutes	<p>Let small groups begin role-plays. Ask members to limit role-plays to 4 or 5 helper responses.</p>			<p>To be sure level 3 responses, or those above or below, are being rated accurately.</p>
15.		<p>Interrupt after 10 minutes and ask participants to respond at level 3 for 4 or 5 responses, then attempt to give several <u>higher level responses</u> in role-plays. In a higher level response they will begin to share more of their</p>			<p>To practice genuineness at higher levels</p>

Step	Time	Instructions	Handouts	Rationale	Objective
		own genuine feelings in addition to communicating understanding of the helpee's feelings. Thus throughout the role-plays they must concentrate on their own feelings and experience in the relationship.			
16.	10 minutes	Return to larger group and discuss the role-plays and the dimension of genuineness.			To further clarify genuineness in helping relationships.
Total Time - 115 minutes.					

Helpee Roles - to be presented to each member of the small groups. Prepare two copies of each role.

1. Helpee says: "Often when I'm talking to you I get the impression that you are not telling me something. You seem to say one thing but I think you are hiding something from me. I wish you would tell me whatever it is."
2. "You really know how to help me say what I mean. I have a lot of trouble expressing myself to people. You are one of the first people I have talked to who really seems to understand me. I'm glad I met you and I hope I can keep seeing you."
3. "How come you told him what I said yesterday? It was private between you and me. You had no right to tell him that. I thought I could trust you to keep your mouth shut about it. Now everyone will know."
4. "I have really been feeling low the last few days. I don't want to do anything or see anybody. I don't even want to eat. You are the only one I could turn to. You helped me once before when I felt this way. You're my last hope and if you can't help, nobody can."
5. "Today I really feel like celebrating."

Things have been going so well lately. I want to dance around the room with you and share my happiness."

6. "I wish you would quit asking questions. You're always asking me about this and that and the other thing. When is it my turn? There are lots of things I would like to know about you. But everytime I try to ask you something you change the topic back to me."

Facilitative Genuineness - Leader Demonstration

Helpee roles:

Role 1. The helpee will say: "I don't want to go back home when I leave here. It isn't a happy place to be. Everybody fights and argues all the time. Do you think I'm right in this decision? Oh, I wish you would tell me what to do. I'm so confused."

Examples of Responses:

Level 3:

1. You are really wanting me to make this decision for you because you are so confused and uncertain you don't think you can make it yourself and live with it.
2. It would be much easier for you to go ahead and do what you want if I would make the decision for you.
3. You are having difficulty making this decision and want me to tell you what to do.
4. You don't feel comfortable with your wish not to return home and want me to tell you what to do.

Below Level 3:

1. It's normal to feel this way after being away from home for awhile.
2. You seem to have a lot of trouble making these decisions on your own.
3. Have you discussed this problem with your family?

Role 2. The helper will say: "I'm sick and tired of being told what to do all the time. Everybody is always telling me what to do and I never get a chance to just have some peace and quiet and do what I want. You are as bad as all the rest."

Level 3:

1. You feel pushed around a lot of the time and now you see me doing the same thing when we're together.
2. You would like to decide for yourself how to live your life and you see me interfering with your freedom to do that.

Facilitative Genuineness in Helping Relationships

Genuineness in relationships with others means being yourself with another person. In order to be yourself with another person you must first be aware of what you are feeling toward the other person. It is not always helpful to the other person or to the relationship to blurt out what you are feeling about him, especially if the only statement you could make would be negative. Therefore, it is very important to communicate all responses in a constructive way to find out more about yourself, the other person, and your relationship. This is important in social relationships with a friend, a teacher, a parent, as well as in a helping relationship with a child, a patient, a client. It is often possible in your closest relationships to share almost all feelings and thoughts with the other person in an open direct way, because trust and understanding exist between you and the other person. But if you think about when you first knew your closest friends, it was not always possible or appropriate to be open and direct with them. It took time to build the trust and understanding that now allows you to be yourself with close friends.

In helping relationships it takes time for this trust and understanding to build, as well. However, in helping relationships most of the responsibility for building trust and understanding is up to the helper. At all times the helper must be guided by what would be helpful and

meaningful to the other person. This is particularly important in the early stages of a helping relationship. In the early phases the helper tries to deal with the helpee's concerns honestly by communicating his understanding of the helpee's feelings. He does not state his own feelings but concentrates on the helpee's feelings.

For example, a helpee you are involved with may question you about your honesty with him. At the lowest levels the helper might respond in the following manner: "In order that I can be helpful to you, it is important that we both communicate honestly with each other." In this response the helper does not communicate his understanding of the helpee's feelings. The helper has put distance between himself and the helpee by responding defensively with an intellectual response. A response that would be helpful in the early stages of a relationship might be: "You really want to know whether I have been completely honest with you." With this response, the helper lets the other person know in an honest way that he understands the helpee's feelings and leaves the relationship open to real genuine responses when they are appropriate. In the later stages of helping, the helper can respond at higher levels by both acknowledging the helpee's feelings as well as expressing his own feelings: "I hear the urgency of your question and am hurt by it - wondering if there is any more I can offer - wondering on the other hand, if you're trying to put me in that position." This

is an example of how the helper uses his own feelings in a constructive way to find out more about himself, the helpee and their relationship.

In being genuine with another person it is very important to be aware of your own feelings because genuineness or the lack of it is communicated in other ways besides the words you say. Genuineness is also communicated by the tone of your voice, the expression on your face, hand movements, and other body movements. If these body cues do not fit with what you are saying the helpee will become confused by the differences. For example, if you are feeling very concerned about the helpee at a particular time, the helpee will see this concern in your face and when you respond to him in the following manner: "Don't worry, everything will be alright in a day or two." he will be confused by your statement.

Facilitative Genuineness Scale

5++ (plus-plus)	Helper moves toward higher levels of genuineness-communicates an understanding of the helpee's feelings as well as expressing his own feelings in a constructive way.
4+ (plus)	

Levels of Functioning

3	The helper communicates an understanding of the helpee's feelings in an honest way. Avoids presenting ingenuine (phony) responses
2- (minus)	Helper is ingenuine (phony, intellectual) in his responses to the helpee.
2-- (minus-minus)	His only genuine responses are negative to the helpee.

Figure 4. Levels of Facilitative Genuineness

The communication of facilitative genuineness in a helping relationship changes depending upon the level of the helpee and the stage of the helping relationship. The helper is guided by what is helpful and meaningful to the helpee at a particular moment in time.

Stage 1 of Facilitative Genuineness

This stage of genuineness takes place at the beginning of a relationship with a helpee and is the first phase of helping. The helper attempts to concentrate on the helpee's feelings and communicate his understanding of the helpee in an honest way. The helper's responses match his other behaviour so that he is not ingenuine with the helpee but he does not communicate his genuine feelings at this time. The helper avoids being phony, defensive, intellectual with the helpee. With his responses, the helper lets the helpee know that he understands and can be more genuine when it is appropriate and helpful.

Stage 2 of Facilitative Genuineness

While in stage 1 the helper concentrates on responding to the helpee's feelings, in stage 2 he becomes more active in the expression of his own feelings as well. Movement to this stage takes time because the helpee must feel he can trust the helper and know the helper understands him. When the helper does share his own feelings in the relationship it is important that he do so in a constructive way. This is important for two reasons: first, in order

that the helper can be helpful to the helpee; and second, so that the helpee can learn how to express his own feelings in a constructive way that allows him to find out more about himself. In this way the helper becomes a model to the helpee of someone who can be genuine in a relationship.

One way to view the stages of facilitative genuineness is to see yourself in the first stage concentrating on meeting the needs of the helpee and placing your own needs second to this. In the second stage you would concentrate on meeting the helpee's needs but also begin to deal with your own needs in the relationship by expressing your own feelings.

In learning how to communicate facilitative genuineness to another person it is important that you become aware of your own feelings and experiences as you interact with another person. It is also essential that you begin expressing these feelings to the other person and find out what the other person's response is. This relates very closely to the material discussed in the unit on Description of Feelings.

In this unit the first part of training deals with becoming aware of and communicating your genuine feelings and experiences. The second part of training will deal more specifically with the communication of genuine responses in helping relationships.

SCALE 3

FACILITATIVE GENUINENESS IN INTERPERSONAL PROCESSES:

A SCALE FOR MEASUREMENT

Level 1

The first person's verbalizations are clearly unrelated to what he is feeling at the moment, or his only genuine responses are negative in regard to the second person(s) and appear to have a totally destructive effect upon the second person.

Example: The first person may be defensive in his interaction with the second person(s) and this defensiveness may be demonstrated in the content of his words or his voice quality. Where he is defensive he does not employ his reaction as a basis for potentially valuable inquiry into the relationship.

In summary, there is evidence of a considerable discrepancy between the inner experiencing of the first person(s) and his current verbalizations. Where there is no discrepancy, the first person's reactions are employed solely in a destructive fashion.

Level 2

The first person's verbalizations are slightly unrelated to what he is feeling at the moment, or when his responses are genuine they are negative in regard to the second person; the first person does not appear to know how to employ his negative reactions constructively as a basis for inquiry into the relationship.

Example: The first person may respond to the second person(s) in a "professional" manner that has a rehearsed quality or a quality concerning the way a helper "should" respond in that situation.

In summary, the first person is usually responding according to his prescribed role rather than expressing what he personally feels or means. When he is genuine his responses are negative and he is unable to employ them as a basis for further inquiry.

Level 3

The first person provides no "negative" cues between what he says and what he feels, but he provides no positive cues to indicate a really genuine response to the second person(s).

Example: The first person may listen and follow the second person(s) but commits nothing more of himself.

In summary, the first person appears to make appropriate responses that do not seem insincere but that do not reflect any real involvement either. Level 3 constitutes the minimal level of facilitative interpersonal functioning.

Level 4

The facilitator presents some positive cues indicating a genuine response (whether positive or negative) in a nondestructive manner to the second person(s).

Example: The facilitator's expressions are congruent with his feelings, although he may be somewhat hesitant about expressing them fully.

In summary, the facilitator responds with many of his own feelings, and there is no doubt as to whether he really means what he says. He is able to employ his responses, whatever their emotional content, as a basis for further inquiry into the relationship.

Level 5

The facilitator is freely and deeply himself in a non-exploitative relationship with the second person(s).

Example: The facilitator is completely spontaneous in his interaction and open to experiences of all types, both pleasant and hurtful. In the event of hurtful responses the facilitator's comments are employed constructively to open a further area of inquiry for both the facilitator and the second person.

In summary, the facilitator is clearly being himself and yet employing his own genuine responses constructively.

Guidelines for Communication of Genuineness

The helper will find that he is most effective in communicating genuineness when:

1. he attempts to minimize the effects of his role, professional or otherwise, so that he does not appear phony and allows for involvement on the part of both the helper and the helpee.
2. he communicates no ingenuine responses while he demonstrates a willingness to communicate genuine responses.
3. he increasingly attempts to be as open and free within the helping relationship as is possible - while helper openness and freedom are not always possible or appropriate, the communication of the potential for these dimensions is essential.
4. he can share experiences with the helpee as fully as possible - spontaneous sharing on the part of both parties is the essence of a genuine relationship. Here helper sharing of personally relevant material may be important when appropriate; however, the moment-to-moment sharing of ongoing experiences is even more essential to the communication of genuineness.
5. he can learn to make open-ended inquiries into the most difficult areas of his experience with the helpee.
6. he relies upon his experience in the relationship as the best guideline. Whereas in empathy formulations

the helper relies primarily upon his experience of the helpee, in the communication of genuineness he relies and acts primarily upon his experience of himself.

UNIT 8: THE COMMUNICATION OF CONCRETENESS OR SPECIFICITY OF EXPRESSION

Leader Information:

Objective:

Step	Time	Instructions	Handouts	Rationale	Objective
1.	2 minutes	Brief schedule of steps			To provide an overview of the unit.
2.	10 minutes	Distribute Handout 1; Concreteness in Helping Relationships. Explain concreteness to participants. Ask participants to read handout.	Handout 1		To provide cognitive material.
3.	5 minutes	Distribute Handout 2; A Scale for Measurement, and Handout 3; Guidelines for Communication of Concreteness.	Handout 2 Handout 3		
4.	2 minutes	Explain that in the initial stages of training the participants will try to reach <u>minimally facilitative levels of concreteness (level 3)</u> by guiding the discussion into consideration of the specific feelings the helpee has about his areas of concern.		Opportunity to observe the communication of concreteness.	To demonstrate concreteness to participants. To begin rating on this dimension.

Step	Time	Instruction	Handouts	Rationale	Objective
		<p>First the leader will demonstrate with one of the participants. Ask one member of the group to think about a particular concern he has about his experience in the group so far. The leader will demonstrate concreteness by attempting to lead the discussion into specific feelings associated with this concern. Ask the group to rate the leader on whether or not he is achieving a minimal level of concreteness.</p>			
5.	5 minutes	<p>Begin demonstration with a participant. Ask participants for ratings.</p>		Opportunity to ask questions and state own ideas.	To clarify understanding of concreteness.
6.	5 minutes	<p>Discussion of the demonstration and what concreteness means to the participants. Can they see how concreteness complements empathy?</p>			
7.	5 minutes	<p>Ask another group member to become helpee and express a concern about his experience in the group. Another member will be the helper and help him to develop in specific</p>			To be sure the participants have understood the dimension of concreteness.

Step	Time	Instructions	Handouts	Rationale	Objective
		and concrete terms the feelings associated with this concern. The group will rate the helper on whether he was minimally facilitative in developing the area of concern in concrete terms. The helper may clarify by asking questions but will primarily reflect (level 3) to elicit further exploration. He can also begin to lead the helpee into discussing specific situations and events.			
8.	20 minutes	<p>Break into small groups of 5 in which a helper-helpee interaction will take place. The two observers will rate on level of concreteness. Each member will have an opportunity to be a helper. The helpees can use the following sentence stems: (each take one)</p> <ol style="list-style-type: none"> 1) What annoys me ... 2) The happiest time ... 3) My greatest worry is ... 4) The only trouble ... <p>and finish it as it relates personally to experience in the group. In the interactions ask helper to develop one feeling or experience in</p>		<p>Opportunity to communicate concreteness.</p>	<p>To practice concreteness in a helper-helpee situation using personally relevant material.</p> <p>To achieve level 3 in the communication of concreteness.</p>

Step	Time	Instructions	Handouts	Rationale	Objective
		<p>specific terms first before he goes on to another. In addition to ratings, ask observers to also come up with a response which would lead the helpee to explore his own feelings and experience specifically. They can give this response after rating. Leader spend 10 minutes in each group to help with the rating.</p>		<p>Opportunity to hear other responses.</p>	<p>To expose participants to a number of different responses.</p>
9.	10 minutes	<p>Discussions of the previous interactions.</p> <ol style="list-style-type: none"> 1) How did the discussion of specific feelings and experiences encourage self exploration? 2) Did the helpee find the helper's concreteness helpful to him? 3) Did the helpee understand his feelings and experiences? 			<p>To discuss the consequences of concreteness.</p>
10.	2 minutes	<p>Ask participants to return to large group. Explain to participants that you would like them to combine the dimensions in the next role-plays. They will attempt to communicate <u>empathy, respect, genuineness, and concreteness</u> to</p>		<p>Opportunity to communicate all dimensions at once.</p>	<p>To review the dimensions. To practice communicating all dimensions.</p>

Step	Time	Instructions	Handouts	Rationale	Objective
		<p>the helpee.</p> <p>Ask participants to attempt to communicate at level 3 first. The group will rate on the four dimensions at the same time.</p> <p>In the role-plays ask helpees to use one of the sentence stems and finish it.</p> <p>I regret ...</p> <p>I am best when ...</p> <p>I am very ...</p> <p>I secretly ...</p> <p>I ...</p> <p>What pains me ...</p> <p>Other people ...</p> <p>I want to know ...</p> <p>I feel ...</p> <p>I cannot ...</p>			
11.	10 minutes	<p>Begin role-plays.</p> <p>Interrupt after two role-plays and ask the observers to formulate their own responses which they can give after rating.</p>			To hear other responses.
12.	30 minutes	<p>Interrupt again and ask helper to attempt to respond at level 3 (establish an interchangeable base) then attempt an additive response.</p> <p>Continue role-plays until all participants have had an</p>			To attempt a higher level response.

Step	Time	Instructions	Handouts	Rationale	Objective
13.	15 minutes	<p>opportunity to communicate all dimensions at once.</p> <p>Review all dimensions in a discussion.</p>			To answer any questions and clarify misunderstanding.

Total Time - 120 minutes.

CONCRETENESS IN HELPING RELATIONSHIPS

Concreteness or "specificity of expression" involves the direct and complete expression of specific feelings and experiences, regardless of their emotional content. Concreteness includes the specific feelings and experiences of the helpee in situations outside the helping situation as well as the feelings and experiences that exist between the helper and the helpee. The helper enables the helpee to discuss his personal feelings and experiences in specific and concrete terms. Concreteness increases the understanding of both the helper and the helpee of the specific feelings and experiences associated with the helpee's concerns.

The helper's way of responding to the helpee when he mentions a particular experience or feeling can enable the helpee to discuss the experience or feeling more fully. Concreteness in the early stages of helping, goes hand in hand with empathy by concentrating on the full development in specific terms of all instances of concern. Concreteness is expressed by the helper in many ways. The helper might ask specific questions to clarify an instance of concern. Questions, however, are usually followed by a number of empathic responses interchangeable with the helpee's expressions of feeling. This makes possible full exploration of the helpee's problem area. The helper guides the discussion in a way that enables the helpee to discuss his specific feelings and experiences fully and directly.

At low levels of concreteness the helper leads or allows almost all conversation with the helpee to be in vague and abstract terms. The helper may talk with the helpee about his feelings and experiences on an intellectual level. This approach does not enable the helpee to explore and eventually understand his own feelings and experiences.

At higher levels, the helper enables the helpee to discuss specific feelings, situations, and events directly and completely, regardless of their emotional content.

High and Low Levels of Functioning: Illustrations

The following helper-helpee discussions illustrate examples of different levels of functioning by the helper. The first excerpt presents a somewhat depressed helpee in her first meeting with a helper.

Helpee: Sometimes I just get so depressed I just don't know what to do.

Helper: Sometimes you feel like you're never going to get up again.

Helpee: Right. I just don't know what to do with myself. What am I going to do?

Helper: I guess in some ways that - that I've had - I've had the same kind of experience already ... I guess there have been points where I found life hopeless - but I have found that being able to talk with somebody about this and to talk about some of the specifics involved has been very helpful to me.

Helpee: But how is that going to solve my problems? My father hates me - and he punishes me - and he doesn't trust me and he won't let me marry the fellow I want to marry. He says he's no good ...

This brief excerpt of a helping relationship would be rated at minimally helpful level 3 or above. As can be seen,

the helper not only attempts to communicate understanding and respect in a genuine fashion, but also attempts to lead the helpee into a more specific discussion of her difficulties, which she does.

Helpee: Sometimes I get so depressed I just don't know what to do with myself.

Helper: Everyone feels that way once in a while.

Helpee: Yes, but-but-this time I'm really-really as low as I think I can ever get.

Helper: You know you don't have to stay this way all the time.

Helpee: Yes, but - somehow I get the feeling that you don't really want to hear about what's bothering me.

Helper: Sure I do, but everyone has his ups and downs - maybe you can tell me about your ups and downs - what experiences you've had ...

Helpee: (pause) Well, I guess it's true that-that-sometimes I feel better than at other times-uh-but sometimes I'm say up, then sometimes I hit bottom.

The helper generalizes about the helpee's experience leaving the helpee and her feelings out of the picture. The helper does not communicate empathy and respect for the helpee and her experience. In response, the helpee appears confused over whether to continue or not. Finally, she does, but in doing so, explores herself very cautiously in an abstract fashion.

In the following excerpt the helpee is presenting a different feeling to the helper.

Helpee: I get so mad at my supervisor ... everytime I try ... I try to come up with some new ideas he knocks me down. He's a bunch of sour grapes.

Helper: Well, he sounds like a real bastard.

Helpee: That's it ... that's what we call him. Oh, ... sometimes I could ... I just don't know what I would do.

Helper: Boy, you could really let him have it ... You could just cut loose.

Helpee: Yeah ... sometimes I dream about what I would do to him ... but I can't ... doggone it, he's got the power of life and death over me.

Helper: And he'd use it, huh?

Helpee: Yeah, I guess he would.

Helper: I guess I've been hit like that myself and maybe in different ways. Maybe you can let me know about your situation ... what's happened here.

Helpee: Well, for instance, the other day at work I came up with an idea that everyone thought was great ... it could have saved hundred, maybe thousands of hours of work and he cut me to ribbons in front of everybody ... He-he just - can't stand to have anyone better than he. He made me feel like a nothing ... just dirt ...

The helper is right "with" the helpee. He quickly understands where she is and sees the world through her eyes. The helper is able to add to his responses, making it possible for her to get her full feelings out. His communications lead the helpee easily into a meaningful and specific discussion of specific situations and feelings.

Helpee: Oh ... I get so mad at my supervisor - everytime I come up with a creative idea, he cuts me to ribbons. He's just a bunch of old sour grapes.

Helper: I guess you get angry at a lot of people.

Helpee: Well-no, not really - just at irrational authority.

Helper: But, don't you find irrational authority everywhere?

Helpee: No-No, I don't think so. I came in here angry, and I think I had a right to be angry ... But you - you don't seem to understand it.

Helper: Well, that's all I'm trying to do ... simply trying to understand you here. Lots of people define "angry" differently ... how do you define it?

The helper is very inaccurate in his understanding of the helpee's world. Instead of tuning in on and responding to the helpee's experience, he seems to be talking about his own distorted experience. In addition to a lack of empathic understanding, the helper communicates negative regard for the helpee and is ingenuine in a negative fashion. He does not lead the helpee into specific discussion of personally meaningful feelings and experiences.

It is easy to see from the illustrations given that, depending upon the helper's early responses, the helping process may move in different directions. The helping process can move deeply into the helpee's experience or it can move away from the helpee's experience. At minimally helpful levels of responding, the helper's responses are interchangeable with the expressions of the helpee. At higher levels, the helper's responses add to the helpee's statements and help him to explore himself at deeper levels. At lower levels the helper does not have anything to offer the helpee while he sometimes gets part of the helpee's message, he distorts it by thinking about his own experience, and subtracts from the helpee's statement when he responds. As a result, the helpee often feels misunderstood and is not encouraged to discuss his own experience and feelings fully.

Levels of Functioning:

5++ (plus plus)	The helper becomes more and more helpful in leading the discussion so that the helpee can discuss fully, and directly specific feelings and experiences associated with all instances of concern.
4+ (plus)	
3	Helper enables the helpee to talk about the specific feelings, events and experiences associated with most instances of concern, regardless of the emotions.
2- (minus)	The helpee's areas of concern are talked about vaguely and intellectually without talking about specific feelings and experiences.
1-- (minus minus)	

Figure 5. Levels of Concreteness

Similar to empathy, respect and genuineness, the helper may view concreteness in stages. Concreteness is emphasized during the early and late phases of helping.

Initially in a helping relationship concreteness is complementary to attempts to achieve a full understanding of the helpee's area of concern. Thus concreteness is very closely tied to empathy and is expressed with empathic responses which explore feelings and experiences. However, concreteness also involves the helper asking specific questions and leading the discussion very directly into the feelings and experiences which are related to an area of concern. When the helper guides the discussion into talking about the helpee's own feelings and experiences directly and completely (concreteness) three functions are served:

1. It makes sure that the helper's responses are similar in emotional content to the helpee's own feelings and

experiences. In this way the helper will not get too far away from the helpee as he did in two of the illustrations.

2. It encourages the helper to become more accurate in his understanding of the helpee, and any misunderstanding can be straightened out when the feelings and experiences are stated in specific terms.
3. It encourages the helpee to look more closely at his problem areas and emotional conflicts.

Concreteness is de-emphasized in the middle phase of helping when the helper encourages the helpee to explore himself in less specific ways in order to gain a new perspective on the area of concern. The new perspective is often helpful in determining a course of action in the last stage.

During the final stage, the helper becomes much more active in communicating concreteness and leads the helpee to consider alternative courses of action in dealing with his area of concern. The advantages and disadvantages of different alternatives are considered. Concreteness is mainly expressed by questions and answers on the part of both the helper and the helpee.

In summary, initially in helping concreteness encourages and leads the helpee to explore the specific feelings and experiences associated with an area of concern so that both the helper and helpee can gain understanding. In the final stage of helping through concreteness the helper encourages

and leads the helpee to consider and choose different ways of dealing with an area of concern.

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SCALE 5

PERSONALLY RELEVANT CONCRETENESS OR SPECIFICITY OF
EXPRESSION IN INTERPERSONAL PROCESSES:
A SCALE FOR MEASUREMENT

Level 1

The first person leads or allows all discussion with the second person(s) to deal only with vague and anonymous generalities.

Example: The first person and the second person discuss everything on strictly an abstract and highly intellectual level.

In summary, the first person makes no attempt to lead the discussion into the realm of personally relevant specific situations and feelings.

Level 2

The first person frequently leads or allows even discussions of material personally relevant to the second person(s) to be dealt with on a vague and abstract level.

Example: The first person and the second person may discuss that the "real" feelings but they do so at an abstract, intellectualized level.

In summary, the first person does not elicit discussion of most personally relevant feelings and experiences in specific and concrete terms.

Level 3

The first person at times enables the second person(s) to discuss personally relevant material in specific and concrete terminology.

Example: The first person will make it possible for the discussion with the second person(s) to center directly around most things that are personally important to the second person(s), although there will continue to be areas not dealt with concretely and areas in which the second person does not develop fully in specificity.

In summary, the first person sometimes guides the discussions into consideration of personally relevant specific and concrete instances, but these are not always fully developed. Level 3 constitutes the minimal level of facilitative functioning.

Level 4

The facilitator is frequently helpful in enabling the second person(s) to fully develop in concrete and specific terms almost all instances of concern.

Example: The facilitator is able on many occasions to guide the discussion to specific feelings and experiences of personally meaningful material.

In summary, the facilitator is very helpful in enabling the discussion to center around specific and concrete instances of most important and personally relevant feelings and experiences.

Level 5

The facilitator is always helpful in guiding the discussion, so that the second person(s) may discuss fluently, directly, and completely specific feelings and experiences.

Example: The first person involves the second person in discussion of specific feelings, situations, and events, regardless of their emotional content.

In summary, the facilitator facilitates a direct expression of all personally relevant feelings and experiences in concrete and specific terms.

GUIDELINES FOR THE COMMUNICATION OF CONCRETENESS

Initially concreteness goes hand-in-hand with the communication of empathy, enabling the helpee both in the helping relationship and ultimately outside of helping to deal specifically with all areas of concern. This is necessary for effective problem solving by the helpee.

1. In order to enable the helpee to develop specific and concrete communications the helper must make concrete his own responses to the helpee. Even in response to vague helpee communications the helper may attempt to respond in a more specific manner. In this way the helper sharpens the helpee's experiences and brings him closer to his own feelings and experiences.
2. The helper must limit the helpee's discussion to concerns that are meaningful to him to avoid the frequent "storytelling" the helpee may do.
3. The helper can develop more concrete communications by asking for specific details and instances. The questions of who, what, why, when, where and how in regard to specific feelings, experiences, and events are appropriate but only as an entry into specific feelings and experiences in an area of concern. One effective question paves the way for follow up by many interchangeable and additive responses.
4. The helper must rely upon his own experience for determining whether concreteness is appropriate at

certain stages of helping. It is critical during the early stages of problem exploration to determine accurately the problems involved and again in the later stages of helping during problem solving and the trying of new behaviour.

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